SP-218 Rev. 06-01-2018

APPLICATION FOR AUTHORIZATION

TO CARRY A CONCEALED HANDGUN

This request is made to Superintendent of the Virginia State Police for authorization to carry a concealed handgun pursuant to Virginia Code Section 18.2-308.016:

[ ]  **Department Retiree**. *An SP-216A must be completed to apply for nationwide carry privileges under the federal Law Enforcement Officer Safety Act.*

[ ]  **Sworn Employee on Long-Term Leave Due to a Service-Related Injury**. *An SP-216A must be completed to apply for nationwide carry privileges under the federal Law Enforcement Officer Safety Act.*

[ ]  **Sworn Employee Resigned**. *An SP-216A must be completed to apply for nationwide carry privileges under the federal Law Enforcement Officer Safety Act.*

[ ]  **Military-Activated Sworn Employee.** Date of Deployment

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Name |       |       |       |       |
|  | last | first | middle initial | employee code number |
| Address |       |       |       |       |
|  | street | city | county/state | zip code |
| Sex |       | Race |       | Date of Birth |       | Social Security Number |       |
| Height |       | Weight |       | Hair Color |       | Eye Color |       |
| Employment Date(s) |       |  | Date of Retirement or Resignation |       |  | Total Years Sworn Service |       |

I REQUEST AUTHORIZATION TO CARRY A CONCEALED HANDGUN BASED ON THE FOLLOWING NEED:

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|       |
|       |
|       |

A permit issued pursuant to this application must be carried by the recipient at all times while in possession of a concealed handgun. The Criminal Justice Information Services Division Commander, Department of State Police, Post Office Box 27472, Richmond, Virginia 23261-7472 must be notified immediately upon change of address or any information that may be vital to the authority granted.

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| --- | --- | --- |
|       |  |  |
| date |  | signature of applicant |
| (do not write below this line) |

|  |  |
| --- | --- |
| A review of the required databases indicates the applicant is qualified. |  |
|  | cjis division approval |
|  |       |
|  | date |

After consultation with and review of the applicant’s need to carry a concealed handgun and upon determination that the applicant is not disqualified by any provisions of Virginia Code Section 18.2-308.09, this application is:

[ ]  Approved Issuance Number: S

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| --- | --- |
|  [ ]  Not approved for the following reason: |       |
|  |       |
|       |  |  |
| date |  | superintendent or designee |