

**Arson and Explosives Training Request for  
Non-ATF Employees****Course of Interest**

Course ID	Course Title
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**Participant Information**

Name ( <i>Last, First, Middle Initial</i> )	Social Security Number ( <i>Last 4 digits</i> )	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Rank/Title
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Department/Agency Name	Agency Type ( <i>Please check one</i> ) <input type="checkbox"/> Federal <input type="checkbox"/> Local <input type="checkbox"/> International Law Enforcement <input type="checkbox"/> State <input type="checkbox"/> Military
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Hazardous Device School Basic Class Number	HDS Certification Expiration Date:	Advanced Explosives Disposal Techniques Graduation Date
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Department/Agency Address ( <i>Number, Street, City, State, and Zip Code</i> )	Work E-Mail Address
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Office Telephone Number ( <i>Including area code</i> )	Fax Telephone Number ( <i>Including area code</i> )	Length of Time in Public Service
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Supervisor's Name	Supervisor's Signature	Supervisor's E-Mail Address	Telephone Number ( <i>Including area code</i> )
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Briefly Describe Your Area of Responsibility and Duties

**For Arson and Explosives Training**

E-mail this form to [NCETR-mailbox@atf.gov](mailto:NCETR-mailbox@atf.gov)  
or the individual course e-mail as listed on the course website.  
Contact Number: (256) 261-7500

**For Students Interested in the National Firearms Examiner Academy, Please Use ATF E-Form 6330.1.****Privacy Act Information**

This information is provided pursuant to Public Law 93-579 (Privacy Act of 1974) December 31, 1974, relative to the collection of information from prospective students to attend the ATF Training.

- Authority.** 5 U.S.C. §§ 1302, 3301, 3304, and 7201; 42 U.S.C. § 4222; and 46 F.R. 16586.
- Purpose.** The information requested on this form is necessary to process requests from prospective students to attend the ATF National Center for Explosives Training and Research training courses.
- Routine Uses.** The information will be used solely to process the student application form.
- Disclosure of your Social Security Number (SSN).** Disclosure of the individual's SSN is voluntary. Under Executive Order 9367, ATF has the authority to solicit an individual's SSN. The SSN is used to verify the individual's identity. Failure to provide the SSN will delay the processing of an individual's application to attend ATF's arson and explosives training.

**Paperwork Reduction Act Notice**

This request is in accordance with the Paperwork Reduction Act of 1995. The information collection is used to determine the eligibility of the applicant to attend ATF training.

The estimated average burden associated with this collection is 6 minutes per respondent or recordkeeper, depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to the Reports Management Officer, Resource Management Staff, Contracts and Forms Office, Bureau of Alcohol, Tobacco, Firearms and Explosives, Washington, DC 20226.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.