

KANSAS DEPARTMENT OF WILDLIFE, PARKS & TOURISM

KANSAS DISABLED VETERANS HUNTING & FISHING LICENSE APPLICATION

INSTRUCTIONS for new applicants: Please Read Carefully and Print Clearly.

1. Fill in Completely section A of this form
2. Provide a copy of the applicant's current Kansas driver's license or KS ID showing proof of residency.
3. Provide a copy of the applicant's current disabled veterans entitlement papers showing proof of at least 30% disability.
4. If applying for a hunting license, provide a copy of a Hunter's Education Card (If born on or after July 1, 1957)
5. Mail this form and the above copies to: **(DO NOT FAX)** Please allow 2 weeks for processing.

ATTN: License Section/Disabled Veterans
KDWPT Pratt Operations Office
512 SE 25th Ave.
Pratt, KS 67124-8174

INSTRUCTIONS for renewal applications:

If you received a KS Disabled Veterans hunt/fish license last year, fill out the below application and send to the Pratt Office along with a copy of your current Kansas driver's license or Kansas ID showing proof of residency.

SECTION A – TO BE COMPLETED BY APPLICANT (please print)

APPLICANT'S NAME (Last, First, MI)			
SSN	KDWPT#		
COMPLETE HOME ADDRESS (Street, City, State, Zip)			
TELEPHONE (Home/Cell) Circle one	TELEPHONE (Work)	E-MAIL	
BIRTHDATE (mo/day/yr)	HEIGHT (ft/in)	EYE COLOR	HUNTER CERT. ID NUMBER AND STATE
DRIVERS LICENSE NUMBER	STATE	GENDER	WEIGHT
EFFECTIVE DATE OF DISABILITY RATING:		PERCENT OF DISABILITY:	
<p>APPLICANT'S STATEMENT: I, the undersigned, certify that the information on this form is true and correct to the best of my knowledge, and that I am a legal resident of Kansas and have been separated from the armed services under honorable conditions and am aware that my service connected disability must be certified by the KS Commission on Veterans Affairs and such disability is equal to or greater than 30%. <u>I understand that the issuance of hunting and fishing licenses is based on the availability of funds</u> and that the referenced licenses will expire on the date printed on the license.</p> <p>Applicant's name and date: _____ Signature: _____</p>			
<p>REQUESTED ITEMS (Please check appropriate boxes)</p> <p style="text-align: center;"> <input type="checkbox"/> Kansas Hunting License <input type="checkbox"/> Kansas Fishing License </p>			

Privacy Act Statement

Authority: FY 2020 Appropriation Bill – Kansas Legislature

Principal Purpose(s): Used by current Kansas disabled veterans to apply for hunt and/or fish license(s).

Disclosure: Voluntary; however, failure to furnish all information could delay or prevent receipt of benefits