



**DELAWARE MASTER HUNTER  
Program Application**  
**Delaware Division of Fish and Wildlife**  
 McKay House - Office of Hunter Education  
 6180 Hay Point Landing Road, Smyrna, DE 19977  
 Tel: (302) 735-3600 Fax: (302) 653-6755

Instructions: ✓ appropriate boxes.  
 Please type or print clearly.  
**Please call** for more information.

<b>1. Name (LAST, First, Middle)</b>	<b>2. Date of Birth</b>	<b>Place of Birth</b>
<b>3. Street Address</b>	<b>City</b>	<b>State ZIP</b>
<b>4. Driver's License Number &amp; State</b>	<b>5. Basic Hunter Ed Cert # (if known)</b>	
<b>6. E-Mail Address:</b>	<b>7. Home Phone #</b>	<b>8. Cell Phone #</b>
<b>9. Shirt size: S M L XL 2X 3X</b>	<b>10. Soc. Sec. #</b> XXX - XX - ____ _	

**10. Please complete the survey below and indicate all courses you have already successfully completed and any hunting / conservation oriented certifications you may have.**

- |   |  |
|---|--|
| <input type="checkbox"/> DE Basic Hunter Education Course         | <input type="checkbox"/> DE MASTER HUNTER Core Conservation Course   |
| <input type="checkbox"/> DE Bow Hunter Education Course           | <input type="checkbox"/> DE Hunting Handgun Education Course         |
| <input type="checkbox"/> DE Muzzleloader Education Course         | <input type="checkbox"/> DE Precision Rifle/Shotgun Education Course |
| <input type="checkbox"/> DE Turkey Education Course               | <input type="checkbox"/> DE Wingshooting Education Course            |
| <input type="checkbox"/> DE Deer Hunter 101 Education Course      | <input type="checkbox"/> Rifle or Handgun Instructor Course          |
| <input type="checkbox"/> DE Active Volunteer Hunter Ed Instructor | <input type="checkbox"/> DE Trapper Education Course _____           |
| <input type="checkbox"/> DE Bowhunting Instructor Course          | <input type="checkbox"/> CCDW Course & Permit # _____                |
| <input type="checkbox"/> QDMA Whitetail Deer School               |  |
| <input type="checkbox"/> Other Course * * * _____                 |  |

\* \* \* Please explain in Nr. 11 below

**11. Please briefly describe your hunting background and experience.**

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**Please turn over this form and complete the back**

12. Have you ever been arrested or ticketed for a game or weapons violation?    \_\_\_ Yes    \_\_\_ No

13. Have you ever been convicted of a felony or misdemeanor?    \_\_\_ Yes    \_\_\_ No

If you answered yes to either question # 12 or #13 above, please attach a separate letter of explanation.

14. Can you legally possess and use a firearm?    \_\_\_ Yes    \_\_\_ No

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Circle highest level of education completed:

Elementary school:    1 2 3 4 5 6 7 8

High school:    9 10 11 12

College:    1 2 3 4 5 6

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Briefly describe past and present employment.

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I am aware that a criminal history background check by the State Bureau of Identification may be required at my expense for final DMH certification and hereby give my consent for the Division of Fish and Wildlife to order such a background check. If I am accepted into the Delaware Master Hunter Program, I agree to abide by the Policies and Procedures of the program. I further agree to immediately inform the Division of Fish & Wildlife and Master Hunter Program of any convictions or charges of game, misdemeanor or felony violations received at any time after final certification and hereby give my consent for the Division of Fish & Wildlife to periodically update my criminal background investigation. I hereby certify that, to the best of my knowledge, the above information is accurate and complete.

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**SIGNATURE:**

**DATE:**

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**Official Use Only**

Application Received Date: \_\_\_\_\_ Application Reviewed Date: \_\_\_\_\_

\_\_\_ Approved    \_\_\_ Disapproved    \_\_\_ Data Base    \_\_\_ Notified

Core Conservation Course Passed: \_\_\_\_\_ %    Background Check Rec'd Date: \_\_\_\_\_

DMH Certification Approved by : \_\_\_\_\_

Track (s):    \_\_\_ Lg Game Firearm    \_\_\_ Lg Game Archery    \_\_\_ Sm Game / Wing    \_\_\_ Trap

**Comments:** \_\_\_\_\_

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