

Kansas Disabled Veterans Hunting & Fishing License Application



INSTRUCTIONS for NEW APPLICANTS: Please Read Carefully and Print Clearly.

1. Complete Section A
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 demonstrating 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. Please allow two (2) weeks for processing. Mail this form and the above copies to:

ATTN: Licensing/Disabled Veterans
KDWP Pratt Operations Office
512 SE 25th Ave.
Pratt, KS 67124-8174

INSTRUCTIONS for RENEWAL APPLICANTS:

If you received a KS Disabled Veterans hunt/fish license in a previous 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 : APPLICANT INFORMATION

Full Name:	SSN or KDWP No.:			
(Last, First, MI)				
Complete Home Address:	(Street, City, State, Zip)			
Phone (Home/Cell):	Phone (Work):	E-Mail Address:		
Date of Birth:	Height:	Weight:	Eye Color:	Sex:
(MM/DD/YY)				
Driver's License Number:	State:	Hunter Cert. ID Number & State:		
Effective Date of Disability Rating:	Percentage of Disability			
I CERTIFY THAT I AM A LEGAL RESIDENT OF KANSAS AND HAVE BEEN SEPARATED FROM THE ARMED SERVICES UNDER HONORABLE DISCHARGE OR A GENERAL DISCHARGE UNDER HONORABLE CONDITIONS. I AM AWARE THAT MY SERVICE-CONNECTED DISABILITY MUST BE CERTIFIED BY THE KANSAS OFFICE OF VETERANS SERVICES, AND SUCH DISABILITY IS EQUAL TO OR GREATER THAN 30%. I UNDERSTAND THAT THE ISSUANCE OF HUNTING AND FISHING LICENSES IS BASED ON THE AVAILABILITY OF FUNDS AND THAT THE REFERENCED LICENSES WILL BE PERMANENT AS LONG AS I REMAIN A KANSAS RESIDENT. PURSUANT TO K.S.A. 53-601(A)(2), I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF KANSAS THAT THE FOREGOING IS TRUE AND CORRECT.				
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Applicant Name (printed)	Applicant Signature	Executed On (date)		
REQUESTED ITEMS (Please check appropriate boxes)				
<input type="checkbox"/> Kansas Hunting License	<input type="checkbox"/> Kansas Fishing License			