



Gunsmithing School Application

Please Print:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Alt. Phone : _____

Email: _____

When do you anticipate entering the TSC Gunsmithing

Spring 2025 _____ Fall 2025 _____ Spring 2026 _____ Fall 2026 _____

Have you previously applied for this program? No _____ Yes _____ Year _____

Please list 3 references (teacher, employer, minister, etc.) NOT related to you, or currently associated with TSJC Gunsmithing School. Please have these references submit a letter of recommendation to:

Trinidad State College Attn:

Bryce Seamans

600 Prospect St.

Trinidad, CO 81082

or bryce.seamans@trinidadstate.edu

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Choose ONE:

____ Reference letters will be shown to me upon request.

____ Reference letters will remain confidential. I waive my right to review them under the

Signature: _____ Date: _____