



STATE OF UTAH  
NATURAL RESOURCES  
Division of Wildlife Resources



**UTAH DIVISION OF WILDLIFE RESOURCES  
HUNTER EDUCATION PROGRAM  
DUPLICATE AFFIDAVIT**

Name (please PRINT) \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip Code

Social Security Number \_\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_ Date of Birth \_\_\_\_\_

Possible names used when Hunter Education was completed (nick name, middle name, maiden name, etc):  
\_\_\_\_\_

Day Time Telephone Number (\_\_\_\_\_) \_\_\_\_\_ Gender: \_\_\_\_\_

THIS IS TO CERTIFY that my original hunter education certificate of completion has been LOST, STOLEN or DESTROYED. I further certify that I have not loaned, given away, or unlawfully disposed of said original certificate and that said certificate of completion is not in my possession.

Anyone who obtains a license, permit or certificate of registration by fraud, deceit or misrepresentation shall be in violation of Utah Code Annotated, Section 23-19-5 and may be guilty of fraud as defined in Section 76-6-501.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Bring completed form AND \$10.00 Check, Money Order or Cashier's Check to the nearest DWR office or mail to:

DWR-HUNTER EDUCATION  
1594 W North Temple Suite 2110  
Box 146301  
Salt Lake City UT 84114

**-DIVISION USE ONLY-**

VERIFICATION	<input type="checkbox"/> In Computer	<input type="checkbox"/> Other: _____
Hunter Education Number:	_____	Date of Certification: _____
Control #:	_____	Customer ID #: _____
Authorized Division Personnel	_____	Date: _____
UPDATES	Customer Profile: _____	Education: _____ Linked: _____