



Firearm Owner's Identification Card - Appeal Requirements
430 ILCS 65/10(c-10)
20 Ill. Admin. Code 1230.70

If your Firearm Owner's Identification (FOID) card application was denied or your card has been revoked, you may appeal to the Director of the Illinois State Police for relief. **Your appeal will NOT be reviewed until ALL of the documentation listed below is submitted to the Firearms Services Bureau Appeals Unit.** You may be required to submit additional documentation at the request of the Appeals Unit.

PETITION FOR RELIEF – INTELLECTUALLY/DEVELOPMENTALLY DISABLED

430 ILCS 65/8(g) – A person who has an intellectual disability.

430 ILCS 65/8(s) -- A person who has been found to have a developmental disability.

430 ILCS 65/1.1 – "Person with a developmental disability" means a person with a disability which is attributable to any other condition which results in impairment similar to that caused by an intellectual disability and which requires services similar to those required by persons with intellectual disabilities. The disability must originate before the age of 18 years, be expected to continue indefinitely, and constitute a substantial disability. This disability results, in the professional opinion of a physician, clinical psychologist, or qualified examiner, in significant functional limitations in 3 or more of the following areas of major life activity:

- (i) self-care;*
- (ii) receptive and expressive language;*
- (iii) learning;*
- (iv) mobility; or*
- (v) self-direction.*

"Person with an intellectual disability" means a person with a significantly subaverage general intellectual functioning which exists concurrently with impairment in adaptive behavior and which originates before the age of 18 years.

- 1. Revoked FOID cards (if applicable) must be surrendered and the Firearm Disposition Record (FDR) form must be presented to the local law enforcement agency where you reside.** The Firearms Services Bureau must receive the card, receipt from law enforcement agency or affidavit and the FDR signed by a law enforcement officer to process your appeal.
*Forms can be found at: <https://ispfsb.com/Public/Firearms/FOID/LostFOIDAffidavit.pdf>
<https://ispfsb.com/Public/Firearms/FOID/DispositionRecord.pdf>*
- 2. Completed Request for FOID Appeal form.**
Form can be found at: <https://ispfsb.com/Public/Firearms/FOID/AppealRequest.pdf>
- 3. Completed Request for Investigation and Waiver of Liability form.**
Form can be found at: <https://ispfsb.com/Public/Firearms/FOID/Investigation.pdf>
- 4. Notarized, signed and dated, statement in your own words, including the following information:**
 - a. Details and circumstances regarding your designation as developmentally or intellectually disabled.
 - b. Details and examples demonstrating your disability will not interfere with your ability to possess firearms.
 - c. Statements regarding any arrests or criminal history that may be in your background.
 - d. Statements or other proof to support your suitability for the restoration of your firearm rights including how your criminal history and reputation are such that you are not likely to act in a manner dangerous to public safety.
- 5. At least two current (within 45 days), notarized letters from adults (signed and dated), stating:**
 - a. His/her full name, date of birth, and relationship to you;
 - b. His/her knowledge of your request to seek relief from a firearm prohibitor and their opinion of your mental and functional ability to possess firearms considering your disability.
- 6. A current Certification for Firearm Possession, form ISP 2-669,** completed by an Illinois Licensed Psychiatrist or Illinois Licensed Clinical Psychologist or Qualified Examiner. See page 2 for definition of Qualified Examiner.
- 7. Any additional documentation** you wish to offer to assist the Illinois State Police in making a determination of your suitability to obtain a FOID card and possess firearms.

Incomplete or inadequate documentation may delay processing or result in the denial of your request. A fact-finding conference may be necessary to make a final determination. If your request for an appeal/relief is denied, you will be offered the opportunity for an Administrative Hearing. *All documents must contain your full name and date of birth, and must be sent to:*

Illinois State Police
Firearms Services Bureau – ATTN: APPEALS
801 South Seventh Street Suite 400-M, Springfield, Illinois 62703-2487



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(405 ILCS 5/1-122) (from Ch. 91 1/2, par. 1-122)

Sec. 1-122. Qualified examiner. "Qualified examiner" means a person who is:

- (a) a ***Clinical social worker*** as defined in this Act,
- (b) a ***registered nurse with a master's degree in psychiatric nursing*** who has 3 years of clinical training and experience in the evaluation and treatment of mental illness which has been acquired subsequent to any training and experience which constituted a part of the degree program,
- (c) a ***licensed clinical professional counselor with a master's or doctoral degree in counseling or psychology*** or a similar master's or doctorate program from a regionally accredited institution who has at least 3 years of supervised post-master's clinical professional counseling experience that includes the provision of mental health services for the evaluation, treatment, and prevention of mental and emotional disorders, or
- (d) a ***licensed marriage and family therapist with a master's or doctoral degree in marriage and family therapy*** from a regionally accredited educational institution or a similar master's program or from a program accredited by either the Commission on Accreditation for Marriage and Family Therapy or the Commission on Accreditation for Counseling Related Educational Programs, who has at least 3 years of supervised post-master's experience as a marriage and family therapist that includes the provision of mental health services for the evaluation, treatment, and prevention of mental and emotional disorders.

A social worker who is a qualified examiner shall be a licensed clinical social worker under the Clinical Social Work and Social Work Practice Act.

(Source: P.A. 96-1357, eff. 1-1-11; 97-333, eff. 8-12-11.)

(405 ILCS 5/1-122.1) (from Ch. 91 1/2, par. 1-122.1)

Sec. 1-122.1. "Clinical social worker" means a person who (1) has a master's or doctoral degree in social work from an accredited graduate school of social work and (2) has at least 3 years of supervised post-master's clinical social work practice which shall include the provision of mental health services for the evaluation, treatment and prevention of mental and emotional disorders.

(Source: P.A. 97-333, eff. 8-12-11.)