



# Nevada Sheriffs and Chiefs Firearms Safety Course Certification of Completion and Firearms Proficiency Certificate



(TO BE COMPLETED BY INSTRUCTOR ONLY)

Issued to: \_\_\_\_\_ Date: \_\_\_\_\_  
Applicant - Please print clearly

I, \_\_\_\_\_, an instructor for \_\_\_\_\_  
Instructor's Name – Please Print Clearly Name of Business – Please Print Clearly

certify that the above named applicant has completed a course of instruction to include the following:

	Applicant Initials	Instructor Initials
Successfully completed a course of instruction and demonstrated proficiency in basic firearm knowledge and the safe handling of firearms.		
Successfully completed a course of instruction and demonstrated proficiency in ammunition knowledge and the safe handling of ammunition.		
Successfully completed a course of instruction and demonstrated proficiency in the cleaning and the care of firearms.		
Successfully completed a course of instruction and demonstrated proficiency in storage and child proofing firearms.		
Successfully completed a course of instruction and demonstrated proficiency in handgun shooting techniques and positions.		
Successfully completed a course of instruction in the laws pertaining to the use of firearms in the State of Nevada and the County in which the application is submitted.		
Successfully completed a course of instruction in the use of deadly force, the force continuum, civil and criminal liability.		
Successfully completed a course of instruction in the knowledge of avoiding criminal attack and controlling a violent confrontation.		
Successfully completed a course of instruction and demonstrated proficiency in firing a handgun and range safety.		
Successfully completed and passed a written examination and a firearms qualification course as required.		

**Circle all that apply**

Full Course (8 Hours): Yes / No . . . . . If Yes, Written Test: Pass / Fail

Renewal Course (4 Hours): Yes / No                      Add Weapons Only: Yes / No

Circle all types of weapons that apply              Revolver                      Semi-Automatic

This certificate satisfies State of Nevada CCW Permit Instructions Requirements.

Location of Classroom and Range (County):

\_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_  
Classroom

\_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_  
Range

\_\_\_\_\_  
Instructor Signature

Under penalty of perjury, I attest that I have completed an approved course of instruction and qualified with each type of firearm listed above.

\_\_\_\_\_  
Applicant Signature