



Nevada Sheriffs' and Chiefs' Association Firearms Safety Course - Certification of Completion and Firearms Proficiency Certificate (TO BE COMPLETED BY INSTRUCTOR)

Issued to: _____ Date: ____/____/____
Applicant Name

I, _____, an instructor for
Instructor Name

Business Name

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.		

Check all that apply

Full Course (8 Hours)
 If Full Course - Written Test: Pass
 Fail
 Renewal Course (4 Hours)

***This certificate satisfies the State of Nevada CCW Permit Instructions and Requirements per NRS 202.3657 ***

Location of Classroom and Range	Start	End
_____ Date: _____ Time: _____ to _____		
Classroom Location		
_____ County _____		
_____ Date: _____ Time: _____ to _____		
Range Location		
_____ County _____		
Instructor Signature _____		

Under penalty of perjury, I attest that I have completed an approved course of instruction and qualified with a handgun. I understand filing a false application is an act of forgery and a violation of Nevada law.

Applicant Signature _____