



Woodland Police Department

Carry Concealed Handgun
Training and Qualification Form



I attest that _____ has completed a:

- 16-hour initial
 4-hour refresher
 Other _____

California Concealed Handgun Course which minimally included instruction on firearm safety, the law regarding the permissible use of a firearm, and qualifying using the standard BSIS course of fire.

Date(s) of Class/Safety Inspection:

I attest that the named student qualified with the specific handgun(s) listed below*:

Make	Serial Number	Caliber	Model	Instructor Initials

**WE DO NOT ALLOW ANY WRITE-OVERS OR CROSS-OUTS. ALL INFORMATION MUST MATCH EXACTLY ON BOTH THIS FORM AND THE INSTRUCTOR'S CERTIFICATE OF TRAINING AND QUALIFICATION. LIST ONLY THOSE GUNS WITH WHICH THE STUDENT SUCCESSFULLY QUALIFIED.*

Name of Firearms training company: _____

Firearms Instructor Name (printed): _____

Firearms Instructor Signature: _____

Range Instructor Certification # _____

Exp. Date: _____

*We **only** accept Firearms instructors who are certified by the CA Dept. of Justice, Bureau of Firearms or the CA Department of Consumer Affairs, Bureau of Security and Investigative Services.*

Instructor Contact Number:

Instructor Email:

THIS FORM SHALL ACCOMPANY ANY RANGE MASTER/INSTRUCTOR DOCUMENTATION FOR ALL INITIAL CCW ISSUANCE, RENEWAL AND WEAPON MODIFICATION.