



South Carolina Criminal Justice Academy Instructional Standards and Testing

Reserve Firearms, EVO and Local Ordinances/Policies Qualification and Training Verification Form

Note: This form must be completed for all Reserve candidates. This form must also be completed for any Reserve Officer transferring to another department and for Constables transferring to Reserve.

Verification & Certification of the Firearms Qualification

PLEASE PRINT:

Candidate's Full Name as indicated on SS Card (Print) : _____ Acadis ID # or SS#: _____
Employing Department: _____

The above named candidate was taken to the firearms range for qualification purposes. I, the Firearms Instructor, certify the following tasks were completed and the results to be accurate, and I recommend the candidate be QUALIFIED.

- (A) Candidate was given basic weapon safety, both on duty and off duty.
- (B) Weapons liability, both on duty and off duty, was explained to the candidate.
- (C) Candidate fired the qualification course required by the SC Criminal Justice Academy with the following results:

Course of Fire:

50 Round, 25 Yard Course	_____	_____
	Points (250 Max – 188 Min)	Date Qualified

Signature of CJA Accredited Firearms Instructor: _____

Print CJA Accredited Firearms Instructor's Name: _____ Acadis ID # or SS#: _____

CJA Accredited Firearms Instructor's Accreditation Expiration Date: _____

Emergency Vehicle Operation Affidavit

I do hereby certify that the above named candidate has been instructed, fully understands and has been given a copy of this department's Emergency Response Driving policy.

Department's Authorized Signature: _____ Date: _____

Print Name: _____ Acadis ID # or SS#: _____

Local Ordinances and Policies Affidavit

I do hereby certify that the above named candidate has been instructed and fully understands this department's Local Ordinances and Policies.

Department's Authorized Signature: _____ Date: _____

Print Name: _____ Acadis ID # or SS#: _____