

STATE OF MONTANA
Montana Board of Private Security Patrol Officers and Investigators
Firearms Certification/Requalification

Student Social Security # _____ \$25.00 Armed Endorsement Fee _____
(must be submitted with certification)

This is to certify that _____ of _____
(Student Name) (Company Name)

has successfully completed the approved firearms training course.

Final Written Score _____ **PASS / FAIL** _____ Check One:
Original Certification _____
Firearms Qualification Score _____ **PASS / FAIL** _____ Requalification _____

Type of Firearm _____ (which is only weapon to be carried on the job)

Comments: _____

The training course began on _____ and ended on _____

comprising a total of _____ hours of instruction which was conducted as approved by the Board.

Signature of Instructor

Printed Name of Instructor

STATE OF MONTANA
Montana Board of Private Security Patrol Officers and Investigators

