

FIREARM PROFICIENCY CERTIFICATE OF COMPLETION

Name

(00-0000)

(Registration Number or social security number (last 6 digits) of student)

This certifies that the above – named individual has met the Firearm Proficiency & Continuing Education requirements for
Commissioned Security Officers established by the Private Security Program.

SECURITY SOLUTIONS ACADEMY

School Name

F01094

School Approval Number

Firearm Instructor

Instructor Approval Number

School Manager

Firearm Qualification Date

Firearm Instructor Signature

SA/STG
Firearm Category

School Manage Signature

.40 CAL. S&W
Firearm Caliber

N/A

N/A

Continuing Education Instructor (If Other than
Firearm Instructor

Continuing Education Instructor Signature (If Other than
Firearm Instructor

PSB-31

TEXAS DEPARTMENT OF PUBLIC SAFETY – Texas Private Security Board

Rev 01/13