

**BASIC SECURITY OFFICER TRAINING COURSE
LEVEL THREE
CERTIFICATE OF COMPLETION**

Name

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

**This certifies that the above-named individual has completed the Basic Security Officer
Training Course approved by the Private Security Program.**

School Name

School Approval Number

Classroom Instructor

Classroom Instructor Approval Number

Firearms Instructor

Firearm Instructor Approval Number

School Manager

Course Completion Date

Classroom Instructor Signature

Firearm Qualification Date

Firearm Instructor Signature

Firearm Category

School Manager Signature

Firearm Caliber