Yuba County Sheriff's Office

Carry Concealed Weapon Training and Qualification Form

I attest that _____ has completed a:
☐ 16-Hour Initial ☐ 8-Hour Refresher ☐ Other: _____

California Concealed Handgun Course which minimally included instruction on firearm safety, firearm handling, shooting technique, safe storage, legal methods to transport firearms, securing firearms in vehicles, laws governing where permitholders may carry firearms, laws regarding the permissible us of a firearm, and laws regarding the permissible use of lethal force in self-defense. The applicant has also qualified using the standard Yuba County Sheriff's Office course of fire, which can be found on the Yuba County Sheriff's Office web page.

Date(s) of Class: _____
I attest that the named student qualified with the specific handgun(s) listed below:

Make	Model	Caliber	Serial Number	Instructor Initial

Required Training Confirmation
☐ Completed all required training as defined in California Senate Bill 2
☐ Firearm safety check performed by range instructor for each firearm listed
☐ Firearm serial number confirmed by range instructor for each firearm listed
☐ Student passed written examination as defined in California Senate Bill 2
☐ All records and testing materials must be retained by the trainer/training facility
☐ Student passed the Yuba County course of fire

Effective January 1, 2025, all firearms instructors must be California DOJ CCW Program Certified Instructors.

Instructor Name (Printed): _____

Instructor Signature: _____ Date: _____

Instructor Certification #: _____ Expiration Date: _____

Instructor Company: _____

Instructor Contact Number: _____

Instructor Email: _____

*****THIS FORM MUST ACCOMPANY THE TRAINING CERTIFICATE AND A COPY OF THE INSTRUCTORS CURRENT DOJ CERTIFIED INSTRUCTOR CERTIFICATE FOR ALL INITIAL ISSUANCE, RENEWAL, AND FIREARM MODIFICATIONS.*****