

INSTRUCTOR CERTIFICATION OF FIREARMS SAFETY TRAINING COMPLETION

Name of Instructor (please print): _____

Name of Trainee/Applicant (please print full name): _____

Date of Birth of Trainee/Applicant (please print) _____

I, the above-listed Instructor, hereby attest, under penalty of perjury, that the following information is true and accurate:

1. I am a Duly Authorized Instructor, as that term is defined in New York State Penal Law § 265.00(19), and deemed approved to provide instruction for the concealed carry firearms safety course required by New York State Penal Law §400 (19).
2. The above-listed Trainee/Applicant has completed BOTH of the following in-person live firearms safety course(s), for which I provided instruction:
 - (a) A minimum of sixteen (16) hours of in-person live curriculum that meets or exceeds the requirements set forth in New York State Penal Law § 400.00(19) and the “Minimum Standards For New York State Concealed Carry Firearm Safety Training” issued on August 23, 2022 and any subsequent amendments to those requirements or standards.
 - (b) A minimum of two (2) hours of a live-fire range training course that meets or exceeds the requirements set forth in New York State Penal Law § 400.00(19) and the “Minimum Standards For New York State Concealed Carry Firearm Safety Training” issued on August 23, 2022 and any subsequent amendments to those requirements or standards.
3. I have administered a written proficiency test to the above-listed Trainee/Applicant that evaluates his/her/their understanding of the requirements set forth in New York State Penal Law § 400.00(19) and the “Minimum Standards For New York State Concealed Carry Firearm Safety Training” issued on August 23, 2022 and any subsequent amendments to those requirements or standards. The above-listed Trainee/Applicant achieved a minimum correct answer score of 80% on his/her/their written proficiency test.
4. I understand that this certification will be provided to and relied upon by the Erie County Firearms Licensing Officer to demonstrate the above-listed Trainee/Applicant has complied with New York State Penal Law § 400.00(19).
5. My Firearm’s Instructor’s Self Certification of Compliance with NYS Concealed Carry Firearms Training is on file with the Erie County Clerk. It can be viewed at: File Number: _____ or Liber: _____ Page: _____

Signature of Above Listed Instructor: _____ **Date:** _____

This certificate is valid for one year from the date indicated above.

ERIE COUNTY HALL • 92 FRANKLIN STREET • BUFFALO, N.Y. • 14202 • PHONE: (716) 858-8785

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