



ARIZONA DEPARTMENT OF PUBLIC SAFETY

TRAINING VERIFICATION FORM

This form must be completed by the applicant, licensed security guard instructor(s), and licensed security guard agency.

☐ UNARMED GUARD	☐ ARMED GUARD	☐ ARMED GUARD ANNUAL REFRESHER
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A. SECURITY GUARD INFORMATION: (to be completed by the security guard)

SECURITY GUARD'S PRINTED NAME (Please print legibly)	DATE OF BIRTH	SECURITY GUARD'S REGISTRATION NUMBER
SECURITY GUARD'S SIGNATURE (per A.A.C. R13-6-6-1, R13-6-602)		DATE OF SIGNATURE

B. UNARMED SECURITY GUARD TRAINING: (to be completed by the unarmed security guard instructor)

NAME (Please print legibly)	INSTRUCTOR'S REGISTRATION NUMBER	DATE UNARMED TRAINING COMPLETED
SIGNATURE OF SECURITY GUARD INSTRUCTOR (per A.A.C. R13-6-601 and R13-6-602)		DATE OF SIGNATURE

I HAVE READ A.A.C. R13-6-6-1 and R13-6-602. My signature on this form affirms that the security guard listed in the first section above has completed the required unarmed security guard training. I also understand that if I knowingly make false statements on this form, I may be subject to disciplinary action and/or revocation of my firearm-safety license.

A.A.C. R13-6-301C2 states, "The instructor shall sign the form affirming that the security guard completed the training."

A.A.C. R13-6-602C2 states, "The instructor shall sign the form affirming that the security guard completed the refresher training."

C. ARMED SECURITY GUARD TRAINING: (to be completed by the licensed firearm-safety instructor)

TYPE OF WEAPON QUALIFIED WITH ☐ Revolver ☐ Semi-Auto	CERTIFICATION TYPE (NRA-type, AZPOST, ALEOAC, DOC)	8 HOURS ☐ 16 HOURS ☐	DATE ARMED TRAINING COMPLETED
FIREARM-SAFETY INSTRUCTOR'S NAME (Please print legibly)		FIREARM-SAFETY INSTRUCTOR'S REGISTRATION NUMBER	
SIGNATURE OF FIREARM-SAFETY INSTRUCTOR (Per A.A.C. R13-6-603)			DATE OF SIGNATURE

I have read A.A.C. R13-6-603. My signature on this form affirms that the security guard listed in the section above has completed the required firearm-safety training. I also understand that if I knowingly make false statements on this form, I may be subject to disciplinary action and/or revocation of my firearm-safety license.

A.A.C. R13-6-603C2 states, "The instructor shall sign the form affirming that the armed security guard completed the firearms-safety training."

D. SECURITY GUARD AGENCY INFORMATION: (to be completed by the licensed qualifying party or resident manager)

As required by A.R.S. § 32-2632, the security guard named above has completed a Department of Public Safety-approved training program.	
SECURITY GUARD AGENCY'S NAME	
SECURITY GUARD AGENCY'S LICENSE NUMBER	IS THE TRAINING CURRICULUM ON FILE WITH DPS? ☐ YES ☐ NO
PRINTED NAME OF QUALIFYING PARTY OR RESIDENT MANAGER	
SIGNATURE OF QUALIFYING PARTY OR RESIDENT MANAGER (per A.A.C. R13-601C, R13-6-602C, and R13-6-603C)	DATE OF SIGNATURE

I have read A.A.C. R13-6-601, R13-6-603. My signature on this form affirms that the security guard listed in the section above has completed the required unarmed training and/or the firearm-safety training. I also understand that if I knowingly make false statements on this form, I may be subject to disciplinary action and/or revocation of my firearm-safety license.

- A.A.C. R13-6-601C3 states, "The qualifying party shall sign the form affirming that the security guard met the training requirements of A.R.S. § 32-2632."
- A.A.C. R13-6-602C3 states, "The agency qualifying party shall sign the form affirming that the security guard met the refresher training requirements of A.R.S. § 32-2632."
- A.A.C. R13-6-603C3 states, "The agency qualifying party shall sign the form affirming that the armed security guard met the firearm-safety training requirements of A.R.S. § 32-2632."