

GOVERNOR’S COMMITTEE ON CRIME, DELINQUENCY AND CORRECTION:
LAW ENFORCEMENT PROFESSIONAL STANDARDS SUBCOMMITTEE

123 Academy Drive
Dunbar, WV 25064

Certification Form – 18 USC §926C

- POLICY -

The purpose of this policy is to promulgate the attached CERTIFICATION form to be used by the individuals desiring to avail themselves of certain allowances afforded by 18 USC §926C. The form relates only to firearms qualification and makes no representation as to the separate question of whether a particular individual is a “qualified retired law enforcement officer” for purposes of 18 USC §926C(c).

Firearms instructors may issue this form only to those individuals who have met the active-duty standards for qualification in firearms training as established by WV CSR §149-2-10, including semi-annual requirements, low-light requirements, and requirements related to the separation of all qualifications by minimum period of three (3) months.

Firearms instructors will retain a copy of issued forms for their files and forward a copy to their respective training section.

[END]

Adopted: June 20, 2005
Revised: August 28, 2025

CERTIFICATION

Signers of this form attest that they are certified firearms instructor who are qualified to conduct firearm tests for active duty officers within the State of West Virginia and that on the below indicated dates, the below indicated “*TESTED INDIVIDUAL*” met the active duty standards for qualification in firearms training as established by the *Law Enforcement Professional Standards Subcommittee of the Governor’s Committee on Crime, Delinquency and Correction* to carry a firearm of the below indicated type.

TESTED INDIVIDUAL NAME (printed) _____
(Last) (First) (MI)

TEST #1

Date _____

Course of Fire _____ DAYLIGHT _____ LOW-LIGHT **Score** _____ ____ **P** ____ **F**

Firearm Type _____

Instructor Name (printed) _____
(Last) (First) (MI)

LEPS Number _____

Instructor’s Signature _____

TEST #2

Date _____

Course of Fire _____ DAYLIGHT _____ LOW-LIGHT **Score** _____ ____ **P** ____ **F**

Firearm Type _____

Instructor Name (printed) _____
(Last) (First) (MI)

LEPS Number _____

Instructor’s Signature _____

CERTIFICATION

Signers of this form attest that they are certified firearms instructor who are qualified to conduct firearm tests for active duty officers within the State of West Virginia and that on the below indicated dates, the below indicated "TESTED INDIVIDUAL" met the active duty standards for qualification in firearms training as established by the Law Enforcement Professional Standards Subcommittee of the Governor's Committee on Crime, Delinquency and Correction to carry a firearm of the below indicated type.

TESTED INDIVIDUAL NAME (printed) _____
(Last) (First) (MI)

TEST #1

Date _____

Course of Fire _____ DAYLIGHT _____ LOW-LIGHT Score _____ P _____ F

Firearm Type _____

Instructor Name (printed) _____
(Last) (First) (MI)

LEPS Number _____

Instructor's Signature _____

TEST #2

Date _____

Course of Fire _____ DAYLIGHT _____ LOW-LIGHT Score _____ P _____ F

Firearm Type _____

Instructor Name (printed) _____
(Last) (First) (MI)

LEPS Number _____

Instructor's Signature _____