

Form S-1

Standard format of training certificate

[See rule 10(1)]

To
The Deputy Commissioner of Police,
Reserve Force (Arms Act Department)
Kolkata Police, Lalbazar

Training Certificate

This is to certify the person whose particulars are furnished below has completed the training as stipulated under rule 10(1) of the Arms Rules, 2016 –

1	Name of the person	
2	Father's Name/Spouse Name	
3	Residential address	
4	Age and date of birth	
5	Training period undergone	From ____ / ____ / ____ To ____ / ____ / ____
6	Details of firearms for which training has been imparted (please specify)	1. Handguns 2. Rifle 3. Shotguns 4. Air weapons
7	Purpose of training (please specify)	1. Application for arms licence 2. Employ with arms dealer 3. Employ with manufacturer 4. Others

The training curriculum included the following modules:

- a) Basic arms and ammunition safety practices, including safe handling and carry procedures;
- b) Firing techniques and procedures;
- c) Care of arms and ammunition;
- d) Safe storage and transportation of arms and ammunition.

The person named above was also imparted reasonable working knowledge of important provisions of the Arms Act, 1959 and Arms Rules, 2016 relevant to him and made to understand responsibilities of the arms owner or user, particularly in relation to children.

Date / / 20

Signatures of the Certifying Person

Place

