



**STATE OF CONNECTICUT**  
**DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION**  
**DIVISION OF STATE POLICE**  
**Special Licensing & Firearms Unit**



**CERTIFICATE OF COMPLETION**

I certify that I instructed the below-named student on the state law requirements pertaining to: (1) safe storage in the home and in vehicles; (2) lawful use of firearms; and (3) lawful carrying of firearms in public, in conformance with Public Act 23-53.

\_\_\_\_\_  
Instructor Name (Printed)

\_\_\_\_\_  
Date of Instruction

\_\_\_\_\_  
Instructor Signature

\_\_\_\_\_  
NRA Instructor ID#  
(if applicable)

I certify that the above-named individual instructed me on the state law requirements pertaining to: (1) safe storage in the home and in vehicles; (2) lawful use of firearms; and (3) lawful carrying of firearms in public, in conformance with Public Act 23-53.

\_\_\_\_\_  
Student Name (Printed)

\_\_\_\_\_  
Date of Instruction

\_\_\_\_\_  
Student Signature