



## Eligibility Statement

### Firearm #1

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Serial Number: \_\_\_\_\_

### Firearm #2

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Serial Number: \_\_\_\_\_

### Firearm #3

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Serial Number: \_\_\_\_\_

## Maintaining Eligibility

Honorably retired Level I reserve deputy sheriffs with a CCW endorsement are personally responsible to maintain the following requirements:

1. Maintain eligibility to carry a loaded firearm.
2. Meet the training requirements of Penal Code 832 and qualify with their firearms at least annually. The retired Reserve shall provide the required ammunition.
3. Contact the S.B.S.D. Range for their yearly firearms qualification appointment.
4. Report all arrests, convictions, restraining orders or any other potential disqualifying information immediately to Volunteer Forces.

Failure to qualify annually or report potential disqualifying information shall result in the revocation of the CCW endorsement privilege.

The Department maintains the right at any time to deny, or revoke a retired Reserve Deputy Sheriff's CCW endorsement. The denial or revocation of this privilege will include a review by the Department's Volunteer Forces Commander. All decisions are final and not subject to further review or appeal.

My signature below affirms that all information provided on this application is true and correct, under penalty of perjury, and that I will follow all guidelines regarding eligibility.

\_\_\_\_\_  
Signature

(Signature not required if submitting via email.)

\_\_\_\_\_  
Date

## Qualification Information

This area to be completed by Employee Resources:

Received by Employee Resources: Date \_\_\_\_\_  
Initials & Emp # \_\_\_\_\_

Qualified: \_\_\_\_\_ Range Card Attached: Yes \_\_\_\_\_ No \_\_\_\_\_

Approving Authority: \_\_\_\_\_ Date: \_\_\_\_\_  
Initials & Emp # \_\_\_\_\_