Oklahoma Council on Law Enforcement Education and Training
Municipal Judge Firearms Qualification Report

PART 1 - TO BE COMPLETED BY THE MUNICIPAL JUDGE

Social Security or CLEET Number: _____ Phone # :_____

Name (Last, First MI): _____

Mailing Address: _____

_____

Municipality Represented: _____

By signing below, I certify under penalty of perjury that:

1. There are no willful misrepresentations, omissions, or falsifications in the information provided on this form.
2. I am a Municipal Judge for the State of Oklahoma.
3. I am authorized to carry a firearm for personal protection pursuant to Title 20, Section 129 of the Oklahoma Statutes.
4. I have successfully completed the approved firearms training course.

SIGNATURE: _____ DATE: _____

PART 2 - TO BE COMPLETED BY A CERTIFIED FIREARMS INSTRUCTOR

Date of Qualification: _____

Location of Qualification: _____

Printed Name of Rangemaster or
Person Supervising Qualification: _____

By signing below, I certify under penalty of perjury that:

1. The above named person completed the approved training course and attained the minimum score of 72 points on the 25-round CLEET Handgun Qualification Course.
2. I am a certified firearms instructor.
3. There are no willful misrepresentations, omissions, or falsifications in the information provided on this form.

CLEET Firearms Instructor Number: _____ Phone #: _____

SIGNATURE: _____ DATE: _____