



South Carolina Concealed Weapons Permit Instructor / Student Checklist



Instructions: This form must be submitted with the Concealed Weapons Permit application. Instructors should retain a copy for their records.

Student Name: _____ Number: _____

Address: _____

Instructor Name: _____ Number: _____

Date Training Completed: _____ Location: _____

Under penalty of perjury I certify that I have successfully completed a SC CWP training class and have a working understanding of the following related topics:

(Initial Below)

- 1) Statutory and case law regarding deadly force _____
- 2) SC laws governing firearms and concealed weapons permits _____
- 3) Proper firearms storage practices that deny access to children _____
- 4) Prohibited carry locations _____
- 5) Liability and responsibility issues relating to firearms _____
- 6) Proper interaction with Law Enforcement Officers _____
- 7) The four cardinal firearm safety rules _____
- 8) Handgun safety, manipulation, and operation _____
- 9) Basic handgun marksmanship _____
- 10) Proper concealment techniques and drawing from concealment _____
- 11) Qualification on the range with the Instructor _____

***Law Enforcement/Military Exemption (Attach Documentation)**

(Exempt applicants are only required to certify items 1 through 6)

Student Signature: _____

Under penalty of perjury I certify that this student has successfully completed a course of instruction that meets the standards set forth in Section 23-31-210 of the South Carolina Code of Laws and specifically included the items listed above.

Based upon his/her performance in the CWP training class that I conducted, I recommend that this applicant be issued a Concealed Weapons Permit.

Test Score: _____ Qualification Score: _____

Instructor Signature: _____ Date: _____