



**Commonwealth of Virginia
Department of Criminal Justice Services**

SCHOOL SECURITY OFFICER (SSO) — Training Completion Form

In order to conform to *Virginia Code*, the Virginia Department of Criminal Justice Services (DCJS) Virginia Center for School and Campus Safety “shall require any school security officer who carries a firearm in the performance of his duties to provide proof that he has completed a training course provided by a federal, state, or local law-enforcement agency that includes training in active shooter emergency response, emergency evacuation procedure, and threat assessment.” **This form is required by DCJS before such school security officer may carry a firearm in the performance of his duties.**

This form is not a certification by DCJS that the school security officer identified herein is proficient in ability or skill in active shooter emergency response, emergency evacuation procedures, or threat assessment. Nor is this form a certification that the individual is proficient with a firearm. It is incumbent upon the local school board to determine whether the individual named within has the necessary skills and abilities to carry a firearm in the performance of his or her duties as a school security officer.

SSO Name: _____

SSO Employer: _____

Date of Hire: _____

Date of Original SSO Certification: _____

In accordance with § [22.1-280.2:1](#) *Employment of School Security Officers*, all School Security Officers must submit proof of completion of the following trainings to DCJS. To satisfy this requirement, this form must be signed by the chief law-enforcement officer of the law-enforcement agency that provided the training, or the chief law-enforcement officer’s designee, confirming completion of the required training. **Please note training provided by a local law-enforcement agency meets the requirements of § 22.1-280.2:1 only if the school security officer is employed by the local school board for the same locality served by the local law-enforcement agency.**

Training Completed:

- Active Shooter Emergency Response Emergency Evacuation Procedure Threat Assessment

I certify that the School Security Officer above attended all training prescribed in accordance with § [22.1-280.2:1](#).

Chief Law-Enforcement

Officer/Designee Signature: _____ **Date:** _____

SSO Signature: _____ **Date:** _____

To be completed by SSO Supervisor

Supervisor Name: _____

Supervisor Email: _____

Name of Division: _____

I certify the SSO is employed by the division, in good standing, and I have reviewed the attached documentation.

Supervisor Signature: _____ **Date:** _____

The Virginia Department of Criminal Justice Services acknowledges that it has received proof of your completion of a training course that satisfies the requirements of clause (iv) of Va. Code § 22.1-280.2:1. The local school board that employs you is responsible for ensuring that you have satisfied all the other requirements set forth in of Va. Code § 22.1-280.2:1 in order for you to be authorized to carry a firearm during the performance of your duties as a school security officer.

DCJS Signature: _____ **Date:** _____