

COMMONWEALTH OF VIRGINIA Department of Criminal Justice Services

P.O. Box 1300 • Richmond, VA 23218

Phone: (804) 786-4700 • Fax: (804) 786-6344 <u>www.dcjs.virginia.gov</u>

Private Security Services – TRAINING SCHOOL COMPLIANCE INSPECTION							
Information							
Date:	School Number:	Audit Num	ber:				
Training School:	Training School Director:						
Mailing Address (Street/Apt.#):			City, State, Zip:				
Physical Address (if different that mailing address):			City, State, Zip:				
The state of the s							
Email Address:			Contact Name:				
Business Phone: ()	Fax: ()						
PART 1 – General Provisions							
 School address, 6 VAC 20-173-7 Designated training director, 6 VA Notification: Instructors or SMS, 6 Display training school certification Liability insurance, 6 VAC 20-173 Notification of convictions, 6 VAC Any change in ownership, 6 VAC Any change in operating name, 6 Any change in entity, 6VAC 20-173 Maintain authorization for SMS, 6 Lesson plans/each training subject Lesson plans/each firearms subject List of all training locations List of all firing ranges List of all SMSCurrent copies Copies of current topical out Maintain current files that include attendance records master final examination pass/fail recording of examed training completion rosters training completion forms/ea School number/advertising mater Session Notification Forms, 6 VA Changes-TSN Form, 6 VAC 20-1 	Comp.	Non/Comp.					

04/2018 Page 1 of 2

Comments/Violations (you may include additional pages if needed)					
Database update needed:	☐ Yes	□No	Additional forms attached: Yes No		
Inspection Acknowled	gement				
The results of this inspection have been fully explained to me by the Virginia Department of Criminal Justice Services agent investigator. I understand that areas of noncompliance must be corrected by, and that administrative action may occur as a result of this inspection.					
Investigator Signature		Date	School Director's Signature Date		
Print Name			Print Name		

04/2018 Page 2 of 2