



# FIREARMS TRAINING UNIT ATTENDANCE SHEET

## CHICAGO POLICE DEPARTMENT

By signing below, participants acknowledge and certify:

- 1) They are using a functional Department approved holster.
- 2) Their Illinois Firearms Owners Identification Card (FOID) is current (not expired) and up to date.
- 3) Department members understand that they must complete the required Firearms Qualification eLearning and shoot a minimum of 70% on the Qualification Course to be considered "Qualified".

Course Information		Session Information		
Code:		Start Date:	End Date:	Watch:
Title:		Location:		
Instructor(s):		CPD Contact:		

*Requested information must be **legible** in order to receive credit for the course.*

1	Last Name	First Name	Star	Unit	Make	Cal	Signature		1 - 2 - F
	FOID #		FOID exp		Model		Need 8 hr. Cert.	Taser Recert	
2	Last Name	First Name	Star	Unit	Make	Cal	Signature		1 - 2 - F
	FOID #		FOID exp		Model		Need 8 hr. Cert.	Taser Recert.	
3	Last Name	First Name	Star	Unit	Make	Cal	Signature		1 - 2 - F
	FOID #		FOID exp		Model		Need 8 hr. Cert.	Taser Recert.	
4	Last Name	First Name	Star	Unit	Make	Cal	Signature		1 - 2 - F
	FOID #		FOID exp		Model		Need 8 hr. Cert.	Taser Recert.	
5	Last Name	First Name	Star	Unit	Make	Cal	Signature		1 - 2 - F
	FOID #		FOID exp		Model		Need 8 hr. Cert.	Taser Recert.	
6	Last Name	First Name	Star	Unit	Make	Cal	Signature		1 - 2 - F
	FOID #		FOID exp		Model		Need 8 hr. Cert.	Taser Recert.	
7	Last Name	First Name	Star	Unit	Make	Cal	Signature		1 - 2 - F
	FOID #		FOID exp		Model		Need 8 hr. Cert.	Taser Recert.	
8	Last Name	First Name	Star	Unit	Make	Cal	Signature		1 - 2 - F
	FOID #		FOID exp		Model		Need 8 hr. Cert.	Taser Recert	

Carry Over	9 mm _____	.38 _____	.40 _____	.45 _____	Total _____	Need 8 Hr. Cert. Carry Over _____	Taser Recert. Carry Over _____
This Page	9 mm _____	.38 _____	.40 _____	.45 _____	Total _____	This Page _____	This Page _____
Total	9 mm _____	.38 _____	.40 _____	.45 _____	Total _____	Total _____	Total _____