



New Mexico Regulation and Licensing Department
BOARDS AND COMMISSIONS DIVISION
Private Investigations Advisory Board
P.O. Box 25101 • Santa Fe, New Mexico 87504
(505) 476-4622 • Fax (505) 476-4615 • www.rld.state.nm.us

**SECURITY GUARD APPLICANT
TRAINING VERIFICATION FORM**

Last Name: _____ **First:** _____ **Middle:** _____

LEVEL 1 TRAINING
(See Rule 16.48.2.17D NMAC)

I completed the required eight-hour (8-hour) training that covered the curriculum approved by the Regulation and Licensing Department (RLD) and that was provided by one of the following:

- a public educational institution or a post-secondary educational institution licensed by the New Mexico Higher Education Department.

Institution Name _____ **Telephone No.** _____

- an in-house training program provided by a licensed private patrol company.

Company Name _____ **NM Registration No.** _____

- any other Regulation and Licensing Department (RLD) -approved educational institution.

Institution Name _____ **Telephone No.** _____

Instructor Name _____

LEVEL 2 TRAINING
(See Rule 16.48.2.18D NMAC)

I completed the required twenty-hour (20-hour) training that covered the curriculum approved by the Regulation and Licensing Department (RLD) and that was provided by one of the following:

- a public educational institution in New Mexico or an educational institution licensed by the higher education department pursuant to the Post-Secondary Educational Institution.

Institution Name _____ **Telephone No.** _____

- an in-house training program provided by a licensed private patrol company.

Company Name _____ **NM Registration No.** _____

- the New Mexico law enforcement academy.

Academy Name _____ **Telephone No.** _____

- any other Regulation and Licensing Department (RLD) -approved educational institution.

Institution Name _____ **Telephone No.** _____

Instructor Name _____

LEVEL 3 TRAINING
(See Rule 16.48.2.19D NMAC)

I completed the required sixteen-hour (16-hour) training provided by **one** of the following:

- a public educational institution or a post-secondary educational institution licensed by the New Mexico Higher Education Department.

Institution Name _____ **Telephone No.** _____

- an in-house training program provided by a licensed private patrol company.

Company Name _____ **NM Registration No.** _____

- the New Mexico law enforcement academy.

Academy Name _____ **Telephone No.** _____

- any other Regulation and Licensing Department (RLD) -approved educational institution.

Institution Name _____ **Telephone No.** _____

Instructor Name _____

WEAPONS and FIREARMS

****Important Information****

(See Rules 16.48.2.18E and 16.48.2.19D NMAC)

LEVEL I Security Guards MAY NOT USE WEAPONS OR FIREARMS while on duty.

Level 2 and 3 Security Guards must apply for and receive an **Additional Endorsement** by the Regulation and Licensing Department **PRIOR TO** carrying a weapon or firearm while on duty.

Electronic Control Device (ECD/taser) Endorsement (Level 2 and 3 Security Guards ONLY)

- YES, I REQUEST PERMISSION TO CARRY AN ELECTRONIC CONTROL DEVICE (ECD/taser) while performing security guard duties.
- I have completed the required eight-hour (8-hour) training (Rule 16.48.2.18E NMAC) and ATTACHED is a copy of my instructor's credentials as a certified ECD/taser instructor and a copy of the ECD/taser manufacturer's certificate.

Firearms Endorsement (Level 3 Security Guard ONLY)

- I REQUEST PERMISSION TO CARRY A FIREARM while performing security Guard Level 3 duties.
 - I have completed the required training (50-round day course) provided by the New Mexico Law Enforcement Academy or the National Rifle Association (Rule 16.48.2.19D NMAC) and ATTACHED is a copy of my instructor's certification(s.)

APPLICANT ATTESTATION AS TO TRUTH AND ACCURACY OF TRAINING VERIFICATION FORM

I _____ (*Print Applicant's Name*), hereby affirm that the information provided in this *Training Verification Form* and its attachments are true and complete to the best of my knowledge and belief. I understand that any information contained herein, including in the attachment(s), may be investigated and false or dishonest statements provided herein may be grounds for license denial or revocation.

I further understand that by law I cannot hold myself out to be a registered security guard or stand post in New Mexico until I have received a state-issued guard card.

Applicant's Signature _____ **Date** _____

Attachments:

- [Level III] Instructor's Certification from NRA or NM Law Enforcement Academy
- [Level II & III] Instructor's ECD/Taser Instructor Certification
- ECD/Taser Manufacturer Certification