

# CERTIFICATE OF TRAINING

(Approved entity provider)  
(Logo optional)

Hereby Awards This Certificate to

**(Student Name)**

In Recognition of Attendance at the (Approved Curricula)'s  
Approved

**"Initial Security Guard 8-Hour Training"**

In accordance with the Hawaii Revised Statutes 463-10.5

On

**(Class Date)**

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(Instructor Name),  
Board Approved Instructor