

Police and Correctional Training Commissions

6852 4th STREET • SYKESVILLE, MARYLAND 21784 • www.mdle.net
(410) 875-3400 • Email: MPCTC.programapprovals@Maryland.gov

ANNUAL FIREARMS PROGRAM APPROVAL APPLICATION

RETURN APPROVAL TO:

Agency Name: _____ Agency Code: _____

Contact Name: _____

Telephone: _____

Email: _____

FOR MPCTC USE ONLY:

Approval Period: _____

Date/Approved by: _____

Approval Number: _____

FIREARMS JUDGMENTAL/DECISION TRAINING

Training Requirements:

An officer shall annually receive instruction and skills development conducted in the classroom, using firearms simulation, or on a firing line, to enable an individual to: (a) differentiate between threat levels; and (b) respond appropriately to an identified threat.

Description of Training (must be completed):

Weapon(s): _____ (if applicable).

Ammunition: Authorized by agency or ballistic equivalent (if applicable).

Instructor(s): Attach list by name(s) and certification number(s).

Permission to deviate from the required MPCTC Firearm Program should be requested in writing (with explanation), and submitted with said program. MPCTC Regulations require that all Firearms Instructors be certified by MPCTC and that their certification be current. It is not necessary to send any other documentation with this application, however, said documentation should be kept on file within said agency.

I certify that all information provided on this application is true and correct.

Agency Representative Name

Signature

Title

Date