

**MARYLAND POLICE AND CORRECTIONAL TRAINING COMMISSIONS  
FIREARM PROGRAM APPROVAL APPLICATION**

**WEAPON CONVERSION – SECONDARY HANDGUN**

Place an "X" in the box to indicate what conversion you are requesting

**MPCTC USE ONLY**

**P - \_\_\_\_\_**  
**Approval # / Initials    Date                      Expires**

**Department** \_\_\_\_\_

**Agency Code** \_\_\_\_\_

**Address** \_\_\_\_\_

**Contact Person** \_\_\_\_\_

**Telephone** \_\_\_\_\_

**E – Mail** \_\_\_\_\_

**Instructor(s)**-Attach list by name and certification number

**SECONDARY WEAPON – DIFFERENT TYPE**

**Weapon from** \_\_\_\_\_ **to** \_\_\_\_\_

**Hours** \_\_\_\_\_ (14 hours minimum for classroom instruction, training and qualification)

**Number of Rounds** \_\_\_\_\_ (400 rounds minimum, authorized by agency or ballistic equivalent)

**Classroom** – to include (a) nomenclature of firearm (b) care and cleaning of firearm (c) ballistic properties (d) mechanical operation of firearm (e) malfunction causes and clearing

**Training Drills** – to include (a) reinforcement of fundamentals (b) reloading techniques (c) clearing malfunctions.

**Qualification - Day Fire**

**Program # of agency approved day course P-** \_\_\_\_\_

**Qualification – Night Fire**

**Program # of agency approved reduced light course P-** \_\_\_\_\_

**SECONDARY WEAPON – SAME TYPE**

**Weapon from** \_\_\_\_\_ **to** \_\_\_\_\_

**Hours** \_\_\_\_\_ (7 hours minimum for classroom instruction, training and qualification)

**Number of Rounds** \_\_\_\_\_ (200 rounds minimum, authorized by agency or ballistic equivalent)

**Classroom** – to include (a) nomenclature of firearm (b) care and cleaning of firearm (c) ballistic properties (d) mechanical operation of firearm (e) malfunction causes and clearing

**Training Drills** – to include (a) reinforcement of fundamentals (b)reloading techniques (c) clearing malfunctions.

**Qualification - Day Fire**

**Program # of agency approved day course P-** \_\_\_\_\_

**Qualification – Night Fire**

**Program # of agency approved reduced light course P-** \_\_\_\_\_

**Instructor(s)**-Attach list by name and certification number

Permission to deviate from the required MPCTC Firearms 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.

Printed Name  
January 2009

Signature

Title

Date