MARYLAND POLICE AND CORRECTIONAL TRAINING COMMISSIONS
FIREARM PROGRAM APPROVAL APPLICATION

ANNUAL QUALIFICATION – DAY

MPCTC USE ONLY

Approval # / Initials Date Expires

Check box to indicate which application is requested

□**PRIMARY HANDGUN**

□**SECONDARY HANDGUN**

Department_____ **Agency Code**_____

Address_____

Contact Person _____ **Telephone**_____

E – Mail_____

Weapon(s) _____ **Ammunition – authorized by agency or ballistic equivalent**

Target(s) _____ (human torso or silhouette marked to indicate scoring values with maximum scoring area 725 square inches)

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

Qualification - _____ rounds (30 Rounds Minimum) **Scoring**- % only, _____ (70% minimum)

Required firing distances – (1) less than 5 yards, (2) 5 yards to less than 10, (3) 10 yards to less than 25 yards, (4) 25 yards or farther

Required percentages of rounds – minimum 10%, but not more than 40 %, from any range of the above firing distances.

Maximum times

Course – 2 seconds per round less than 5 yards, 3 seconds per round 5 yards to less than 10 yards, 4 seconds per round 10 yards to less than 25 yards, 5 seconds per round 25 yards or farther.

Reloads – Revolver 17 seconds – Pistol 8 seconds

Movement – 5 seconds maximum permitted to move from one specified firing position to next.

Required weapon holding positions – Strong hand supported by weak hand; strong hand with no support; weak hand supported by strong hand and weak hand with no support

Required body positions – Standing, kneeling and 2 different positions from barricade.

*****Note where reloads or movement to a different firing position are in the course*****

YARD LINE	BODY POSITION	# OF ROUNDS	TIME

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.

_____

Printed Name Signature Title Date

January 2013