

Maryland Special Police Officer
U.O.F Training Completion Affirmation
Public Safety Article 3-524(H)(2)
[SB 71, 2021 Legislative Session]

I, _____, hereby affirm that I have completed the
Officer's Name

_____ (Insert Department Name) Use of Force Training covering the Department/
Agency/Company's policies and procedures and the Maryland Use of Force statute. I understand
the concepts presented in this training, the rules for employing the Department/Employer's
approved methods and procedures regarding Use of Force, and the Maryland Use of Force
statute and will comply with them while fulfilling my duties and responsibilities as a special
police officer.

Officer's Signature

Date

PTSC 1/5/22