

Department of Public Safety and Correctional Services Maryland Police and Correctional Training Commissions

FIREARMS TRAINING FACILITY – REQUEST FOR TRAINING DATES

Instructions for filling out form:

- 1. Prior to submission, telephone the facility (410-552-6300) to inquire if the date(s) requesting are available.
- 2. Submit one form for each training date.
- 3. Make a copy for your records.
- 4. Send original to: <u>JamieL.Green@maryland.gov</u> or <u>GregoryA.Cullison@maryland.gov</u>.

Agency Name: Agency Address (full): Agency Telephone #:

Contact/Requestor Name: Contact/Requestor E-Mail Address: **Requestor Telephone #:**

Type of training to be conducted:

Miscellaneous (List):

Night Fire training is allowed in January, February, March, November & December – ONLY

Desired Date:	Arriva	al Time:	Departure Tim	e:	# of students:
Area(s) of Facility Requested:			Classroom		
50 yard 16 positions Pistol Range			50 yard 11 positions Pistol Range		
25 yard 16 positions Pistol Range			25 yard 11 positions Pistol Range		
Decision Range	2		MILO Judgmen	tal Simulato	or
Rifle Range – 7	2:30 to 11:30		Rifle Range – 1	1:30 to 3:30)
Equipment Needed / 1	Requested:				
Television		Projector	DVD/VCR		PowerPoint
Trigger Gun Sy	rstem	Bristlecone System	Less	Lethal Equ	ipment
Leather Gear		Eye Protection	Hear	ing Protecti	on
Weapon(s) what	it type:				

Signature of: Authorized FTF User / Training Coordinator / ChiefDate				
(F.T.F. Use Only)	Approved- Scheduled	Rejected-Not Scheduled (reason):		
RoomingIt Entered:		Approved By:		
Date Received:		Confirmation Sent:		