

**MARYLAND POLICE AND CORRECTIONAL TRAINING
COMMISSIONS
FIREARMS TRAINING FACILITY
Law Enforcement Officer's Safety Act Training
L.E.O.S.A. – HR-218**

Location: Maryland Police and Correctional Training Commissions
Firearms Training Facility
7320 Slacks Road
Sykesville, Maryland 21784
410-552-6300

- Directions:**
1. From I-70 take exit 80 (Md. Rt. 32).
 2. Go north on Rt. 32, 4 ½ miles to a stoplight at Raincliffe Rd. (Shell gas station on the corner).
 3. Make a right on Raincliffe Rd.
 4. Go to the second road on the left and make a left turn (Slacks Rd.)
 5. We are the first driveway on the left (we are across from the American Legion).
 6. Come in the driveway and park in the 'Students' parking lot.
 7. Clear your weapons in the clearing booth at the end of the lot as you head toward the building.

Weapons must be holstered or cased and empty before you enter the building.

Once you enter the building you will be directed on where to go next.

Times: Morning session begins at 8:00 AM
Afternoon session begins at 12:00 PM
Please don't come into the building more than 15 minutes before the above starting times.
Training will last approximately 3 hours.

Prior to Training: NEW INFORMATION

As of August 1, 2011 the Maryland Police and Correctional Training Commissions, Firearms Training Facility, has assumed responsibility for LEOSA training and issuing of the firearm certification cards to people they train. Maryland State Police are no longer involved in this process.

YOU MUST BE A MARYLAND RESIDENT TO APPLY FOR THIS CERTIFICATION.

YOU MUST POSSESS A PHOTOGRAPHIC IDENTIFICATION CARD ISSUED BY YOUR AGENCY INDICATING THAT YOU ARE A RETIRED OR SEPARATED LAW ENFORCEMENT OFFICER. WITHOUT THIS ID CARD YOU ARE NOT ELIGIBLE FOR L.E.O.S.A.

To access the required forms from the internet:

Go to <http://www.mdle.net>.

On the right side of the screen, click on 'Police Training'.

Then, in the center column of the next page, click on 'LEOSA Guide and Application Form'.

Read & Follow the directions shown on the first page of the 'LEOSA Guide and Application Form'.

The forms may be filled out on-line and printed out, or may be printed out blank and filled out in pen.

Bring the completed forms, **notarized where required**, with you to training.

You must include a photocopy of both your MD Driver's License AND your photo ID issued to you by your respective agency.

FTF will attempt to have your LEOSA firearm certification card available before you leave the day of training.

NOTE:

If you are a LEOSA renewal, meaning you currently possess a LEOSA photo ID card issued to you by the Training Commission, you DO NOT need to complete the Affidavit packet again. Simply bring your weapon, holster, 100 rounds of ammo, current LEOSA photo ID card and your \$50.00 check made payable to MPCTC. Your training registration form will be provided for you here at the facility.

If you need to cancel or change the training date, PLEASE CALL US at 410-552-6300 so we can open your slot to someone else.

If you fail to show for a scheduled training appointment without notifying us as stated above, your next training session will cost you \$100.00 (50 for the training, and 50 for failing to notify us so we could fill your slot). This check should be brought with you to your training session. Failure to do this will result in your not being allowed to train that day.

In addition to the penalty, your name will be added to a "failed to show" roster for one year. Should you fail to show a second time in that year's period without notification, you will no longer be allowed to return to the Commission to obtain your LEOSA training. You will need to obtain your permit from another source.

Training Includes:

1. Two hours of classroom and two qualification courses, one day fire course and one reduced light course (using dark goggles). Qualification courses may be 50 rounds each.
2. You will have approximately one hour of classroom, followed by range firing, and then finish up in the classroom.

Types of weapons:

1. If you qualify with a semi-automatic pistol, you will be certified to carry any semi-automatic pistol.
2. If you qualify with a revolver, you will be certified to carry any revolver.
3. **You may qualify with only one type of weapon – semi-auto pistol OR revolver. No two gun training will be allowed.**
4. All weapons must be drop safe. They must have a firing pin block, hammer block system, or other drop safety system.

Bring:

1. Valid Maryland driver's license.
2. Retired photo ID.
3. **Check or money order ONLY for the training fee - \$50.00.**
NO CASH ACCEPTED.
4. The weapon you are going to qualify with.
5. Two magazines for semi-auto pistol.
6. 100 rounds of **American made ammunition** for your weapon.
NO RELOADED AMMUNITION, NO REMANUFACTURED AMMUNITION, NO FOREIGN MADE AMMUNITION, and NO ALUMINUM CASED AMMUNITION (Blazer).
7. Strong side holster for each weapon. No cross draw, ankle holsters, fanny packs, shoulder holsters, or inside the pants holsters allowed.
8. Proper range clothing: shoes or boots, long pants, shirt that can be fastened at the collar, belt to support the holster.
9. Baseball hat or other hat with a brim to keep brass from falling into your glasses.

We Supply:

1. Eye and ear protection. You may bring your own if you like, prescription glasses are acceptable.
2. Your LEOSA firearm certification card.

Reminder:

1. Our ranges are covered, if it is raining you will not get wet when on the range.
2. You will be in the open walking to the range.
3. The ranges are open to the air, dress appropriately for the temperature.
4. All shooters must be able to kneel down and stand back up on their own. **This is a mandated part of police training and staff can not assist you!**

EFFECTIVE 11-21-2019

MARYLAND POLICE AND CORRECTIONAL TRAINING COMMISSIONS



THE LAW ENFORCEMENT OFFICERS SAFETY ACT
TITLE 18, U.S.C., CHAPTER 44, SECTION B, SUB-SECTION 926C

Guide for completing the Application / Affidavit and Registration Form

You must complete the attached Application / Affidavit (4 pages) and Registration Form (1 page), in its entirety and bring it with you when you attend L.E.O.S.A. training at the Maryland Police and Correctional Training Commissions.

The Application / Affidavit MUST BE NOTARIZED and will become a permanent legal record to be kept at the Training Commission.

You must answer all questions on the Affidavit truthfully to the best of your knowledge.

If your answer is “no” to any of the questions on the affidavit, you will be ineligible to receive the concealed carry certification under current L.E.O.S.A. law.

The Registration Form is self explanatory and should include a CHECK or MONEY ORDER ONLY in the amount of \$50.00 made payable to MPCTC.

You must bring the following items with you as well:

- 1. A copy of the photographic identification card issued to you by your former agency (front and back if applicable).**
- 2. A copy of your MD. Driver’s License.**
- 3. If you are a first time trainee here at the Commission, you MUST bring with you proof of your statutory powers of arrest.**

NOTE: WITHOUT THESE ITEMS, TRAINING & CERTIFICATION WILL NOT BE CONDUCTED!

**MARYLAND POLICE AND CORRECTIONAL TRAINING
COMMISSIONS**



APPLICATION FOR CERTIFICATION TO CARRY A CONCEALED FIREARM

**THE LAW ENFORCEMENT OFFICERS SAFETY ACT
TITLE 18, U.S.C., CHAPTER 44, SECTION B, SUB-SECTION 926C**

Name: _____
(Last) (First) (M.I.)

Home Address : _____
(Street) (City / County)

(State) (Zip Code)

Telephone Number: _____ E-Mail Address: _____

Maryland Drivers License: _____
(License Number) (Expiration)

Date of Birth: ___/___/___ Sex: ___ Race: ___ Height: ___ Weight: ___

Eye Color: _____ Hair: _____

The remainder of this application is an Affidavit consisting of questions to be answered by the applicant concerning the Federal regulations for eligibility to carry a concealed firearm under the Law Enforcement Officers Safety Act, 926C, - "Carrying of a concealed firearm by qualified retired / separated law enforcement officers". This form **MUST** be notarized and sworn to and will become a permanent legal record at the Maryland Police and Correctional Training Commissions.

Affidavit

(Indicate Yes or No)

_____ I understand that in order to carry a concealed firearm as a qualified retired / separated law enforcement officer in accordance with 18 U.S.C. 926C, I must satisfy certain basic criteria. My satisfaction of the certification criteria WILL be based on my answers to the following questions.

_____ The law enforcement agency from which I retired / separated has issued me a photographic identification. A copy of this photographic identification is attached to this application.

_____ I retired / separated in good standing from service with a public agency as a law enforcement officer.

_____ I do reside in the state of Maryland and possess a valid Maryland driver's license. A copy of this license is attached to this application.

_____ The agency I retired / separated from is _____
(Agency),

which is located in _____ (City), _____ (State).

_____ My Entrance of Duty (E.O.D.) date for the above agency was _____
and my retirement / separation from duty date was _____.

_____ I did not retire / separate from duty for reasons of mental instability. I have never been found by a qualified medical professional either private or agency employed, to be unqualified for reasons relating to mental health issues. I am not currently, nor have I ever been institutionalized or under a doctor's care for any mental health related issues.

_____ I did not retire / separate from duty due to any pending investigation or disciplinary action.

_____ During my service prior to retiring / separating as a law enforcement officer for (Agency) _____, I was authorized by

law to engage in or supervise the prevention, detection, investigation or prosecution of, or the incarceration of any person for any violation of law and I did possess statutory powers of arrest.

_____ Before my retirement / separation from duty, I was *either* (check one):

_____ regularly employed as a law enforcement officer for an aggregate of ten (10) or more years and retired / separated in good standing, or

_____ I retired / separated from service with such agency, after completing any applicable probationary period of such service, due to a service-connected (LOD) disability, as determined by such agency.

_____ **I am not under the influence of alcohol or another intoxicating or hallucinatory drug or substance, and I will not carry a firearm while I am under the influence of alcohol or another intoxicating or hallucinatory drug or substance.**

_____ I am not prohibited by State or Federal law from receiving a firearm.

_____ I understand that the term “Firearm” as described in the LEOSA law does not include any sub machine gun, firearm silencer or destructive device.

_____ I understand that the concealed firearm I carry **MUST** be of the same “type” of firearm with which I qualified.

_____ I understand that I must carry the firearm certification issued to me by the Maryland Police and Correctional Training Commissions along with the photographic identification issued to me by my former agency **at all times when carrying the concealed weapon.**

_____ I understand that my certification to carry a concealed firearm under 18 U.S.C. 926C (LEOSA) expires twelve (12) months from its issue date. To continue my right to carry a concealed firearm, I must re-qualify and complete the mandated training prior to the noted expiration date on my certificate. Failure to complete this training and re-qualification to a satisfactory standard will result in my inability to carry a concealed firearm under the LEOSA law.

_____ **I understand that the Law Enforcement Officers Safety Act of 2004, 18 U.S.C. 926C, does not give me any rights whatsoever to exercise law enforcement authority or take police action under any circumstances.**

Any action I take, I take as a citizen with the understanding that I may be prosecuted to the fullest extent of the law both criminally and civilly should my actions be determined by a court of law to be in violation of State Law.

I do hereby declare and affirm under the penalties of perjury that the contents of this application are true and correct to the best of my knowledge, information, and belief and I so indicate below by affixing my signature in the designated space.

Applicant Signature

Date

Subscribed and sworn to before me:

Notary Public _____

This _____ Day of _____ 20_____

My Commission Expires: _____



Maryland Police and Correctional Training Commission
Registration Form

Program: Law Enforcement Officers Safety Act (LEOSA)

Date: _____

Location: Maryland Police and Correctional Training Commission, Firearms
Training Facility, 7320 Slacks Road, Sykesville, Maryland 21784

Registration Fee: \$50.00 Per Person/Non-Refundable

REGISTRATION INFORMATION

PLEASE PRINT NEATLY OR TYPE ALL INFORMATION

NAME: _____

FULL ADDRESS: _____

TELEPHONE: _____

CURRENT EMAIL: _____

FORMER AGENCY: _____

DATE OF TRAINING: _____

PAYMENT INFORMATION:

Registration Fee of \$50.00 Per Person, - NON-REFUNDABLE

Make CHECK or MONEY ORDER ONLY payable to:
Maryland Police & Correctional Training Commission – or – MPCTC

**Maryland Police and Correctional Training Commissions
Firearms Training Facility**

**Law Enforcement Officer Safety Act (LEOSA) Training Program
New Student Registration Form**

First Name

Phone

M.I.

Email

Last Name

Suffix

LEAVE THIS SPACE BLANK

Certification #

Cert. Issue Date

Cert. Exp. Date

Weapon Type

Gender (M/F)

D.O.B.

MD Drivers Lic

Street Address

City / County

State

Agency

Zip Code

EOD SOD

Service Time Years Months

Disability Agency Photo



Department of Public Safety and Correctional Services

Maryland Police and Correctional Training Commissions

6852 4th Street • Sykesville • Maryland 21784

(410) 875-3400 • FAX (410) 875-3975 • V/TTY (800) 735-2258 • www.dpscs.maryland.gov/aboutdpscs/pct

STATE OF MARYLAND

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ACTING DEPUTY
SECRETARY OPERATIONS

CAROLYN J. SCRUGGS
ASSISTANT SECRETARY

GARY W. McLHINNEY
ASSISTANT SECRETARY

ALBERT LIEBNO, JR.
EXECUTIVE DIRECTOR

WAIVER OF LIABILITY

In consideration of being able to complete a Law Enforcement Officer Safety Act (“LEOSA”) training at the Firearms Training Facility, located at 7320 Slacks Road, Sykesville, Maryland 21784 (“FTF”), which is owned by the State of Maryland and operated by the Maryland Police and Correctional Training Commissions (“MPCTC”),

I _____ HEREBY:
[Name of participant]

[Initial before each number and sign at the bottom]

_____ 1. Fully understand and appreciate the dangers, hazards, and risks inherent in a firing range, including the inherent risks associated with the use and misuse of firearms.

_____ 2. Acknowledge and understand that I will be voluntarily engaging in activities that involve the discharging of firearms which may result in the risk of serious injury, scarring, loss of an important bodily function, permanent disability, or death, and may cause severe social or economic losses due to not only my own actions, inaction or negligence, but also to the action, inaction or negligence of others or conditions of the premises or of any equipment used. Further, I acknowledge that there may be other risks not known to me or not reasonably foreseeable at this time.

_____ 3. Assume all the foregoing risks and accept personal responsibility for the damages related to any injury, permanent disability, or death to me.

_____ 4. Indemnify and hold harmless the State of Maryland, MPCTC, and / or their employees, agent, and designees, from any and all actions, liability, claims, suits, damages, costs, and expenses of any kind that result from any injury, loss and / or damage to persons or property that is caused by any negligent actions of mine.

_____ 5. Release from, waive and discharge all actions, claims, or demands that I, my assignees, heirs, guardians, and legal representatives now have or hereafter have for damage or losses on account of injury, including permanent disability and death or damage to property, caused or alleged to be caused in whole or in part by the negligence or other acts of directors, officers, employees or agents of the Maryland Police and Correctional Training Commissions as a result of my participation in any FTF and/or LEOSA activities. I hereby agree and covenant to save and hold harmless, indemnify, and defend any claim against MPCTC and its directors, officers, employees or agents, as a result of my participation in any firearms training facility and/or LEOSA activities and my use of firearms and the firearms training facility.

_____ 6. Agree to comply with all Federal and Maryland State laws regarding the use and possession of firearms. My compliance includes but is not limited to: Title 18, United States Code, Chapter 44 – Firearms; Maryland Public Safety Article Title 5, Firearms; and applicable federal and state regulations.

I HAVE CAREFULLY READ THE ABOVE WAIVER AND RELEASE OF LIABILITY AND FULLY UNDERSTAND THAT I GIVE UP SUBSTANTIAL RIGHTS BY EXECUTING IT. I SIGN THIS WAIVER VOLUNTARILY. I AGREE TO PARTICIPATE KNOWING THE RISKS AND CONDITIONS INVOLVED AND DO SO ENTIRELY OF MY OWN FREE WILL.

I AGREE TO ABIDE BY ALL RULES AND REGULATIONS OF THE FIRING RANGE. I UNDERSTAND THAT FAILURE TO DO SO WILL RESULT IN IMMEDIATE CESSATION OF ALL TRAINING ACTIVITIES, AND I WILL BE REQUIRED TO LEAVE THE PREMISES.

Participant (Printed Name)

Participant Signature

Date

Witness

Date