

#### San Bernardino County Sheriff's Department

http://cms.sbcounty.gov/sheriff/Divisions/VolunteerForces/Reserves.aspx

Email: <u>reserves@sbcsd.org</u>
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655 E. Third Street, San Bernardino, CA 92415



## **Annual Firearms Proficiency Test for Retired Reserve Peace Officers**

In accordance with Law Enforcement Officers Safety Act of 2004 [18 USC 926] and California Penal Codes 25475 & 832 the San Bernardino County Sheriff's Department requires all Retired Reserve Deputy Sheriffs to qualify annually with firearms.

All annual firearm qualifications must occur at a Law Enforcement Agency range with their firearms instructor. Retired personnel are responsible for all range administrative fees and ammunition for each qualification.

## **Applicant Information**

(Type or Print Legibly)

| Last Name:  |                                     | First Name: |             |           |  |
|---|-------------------------------------|-------------|-------------|-----------|--|
| Date of Birth:  | Social Security:                    |             |             |           |  |
| Physical Address:   |                                     |             | State:      | Zip Code: |  |
| Mailing Address:  |                                     | S           | State:      | Zip Code: |  |
| Home Phone Number:  | me Phone Number: Cell Phone Number: |             |             |           |  |
| Email Address:  |                                     |             |             |           |  |
| Firearm Information (Concealable Handguns Only)  Firearm #1 |                                     |             |             |           |  |
| Make:   | Model:                              | Caliber:    | Serial Numb | er:       |  |
| Firearm #2 Make:  | Model:                              | Caliber:    | Serial Numb | er:       |  |
| Firearm #3  |                                     |             | _           |           |  |
| Make:   | Model:                              | Caliber:    | Serial Numb | er:       |  |

# **Qualification Information**

# Firearms Instructor Evaluation Guidelines

The Law Enforcement Range Firearms Instructor shall evaluate the individual on the following requirements:

#### Safe Firearm Handling

- Obedience of the range's safety regulations
- > Safely load and unload the firearm
- > Safely check the firearm to ensure it is clear of ammunition
- > Retiree will load the weapon(s) and magazine(s) for a total of thirty (30) rounds

#### **Fire**

| <u>irearm Accuracy</u>   |                                       |  |  |  |  |
|--|---------------------------------------|--|--|--|--|
| <ul> <li>All shooting will be done from a standing / unassisted state</li> <li>Scoring shall be done on a silhouette (torso) or similar tate</li> <li>24 of the 30 rounds must be on the line or within the score</li> </ul> | rget                                  |  |  |  |  |
| ☐ 1. 5 rounds from a distance of ten (10) yards, in fifteen  | (15) seconds                          |  |  |  |  |
| ☐ 2. 5 rounds from a distance of ten (10) yards, in fifteen (15) seconds   |                                       |  |  |  |  |
| 3. 5 rounds from a distance of seven (7) yards, in fifteen (15) seconds  |                                       |  |  |  |  |
| ☐ 4. 5 rounds from a distance of seven (7) yards, in fifteen (15) seconds  |                                       |  |  |  |  |
| 5. 5 rounds from a distance of five (5) yards, in ten (10) seconds   |                                       |  |  |  |  |
| ☐ 6. 5 rounds from a distance of five (5) yards, in ten (10) seconds   |                                       |  |  |  |  |
| This area to be completed by Firearms Instructor / Range Master  The applicant must successfully qualify within two (2) attempts per calendar week.  |                                       |  |  |  |  |
| Date of Qualification:   |                                       |  |  |  |  |
| Pass:  |                                       |  |  |  |  |
| Reason for Disqualification:   Safety Shooting Notes:  | ·                                     |  |  |  |  |
| Name of Instructor:  | Employee Number/ID:                   |  |  |  |  |
| Signature:   |                                       |  |  |  |  |
| Agency Name:   | Business Phone:                       |  |  |  |  |
| Contact San Bernardino Sheriff's Department / Volunto  | eer Forces with Questions or Concerns |  |  |  |  |

Upon completion, the applicant shall forward this application with a photocopy of a valid/current state driver's license or identification card and all supporting documentation to the San Bernardino County Sheriff's Department, Volunteer Forces Unit, either by email, fax, or postal service using the information at the top of this two page application.

| For Volunteers Forces Use Only     |                     |  |  |  |
|------------------------------------|---------------------|--|--|--|
| Received in Volunteer Forces by:   | Date:               |  |  |  |
| Range Card/Documentation Attached: |                     |  |  |  |
| Approving Authority:Name & ID #    | ID Card Issue Date: |  |  |  |