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HANDGUN PROFICIENCY TESTING RECORD

STUDENT NAME: _____ _____ _____
LAST NAME FIRST NAME M.I.

APPOINTING AGENCY: _____

HANDGUN MAKE: _____ MODEL: _____ CALIBER: _____

SPO	ACTIVITY / TECHNIQUE	TEST 1	TEST 2
2	Demonstrate loading the semi-automatic pistol		
	Maintain muzzle discipline		
	Draw the pistol with their trigger finger off the trigger		
	Seat magazine		
	Charge the chamber		
	Maintain finger outside of the trigger guard when holstering		
	Remove magazine while pistol secured in holster		
	Place round in magazine		
	Seat magazine again		
3	Demonstrate unloading the semi-automatic pistol		
	Draw the pistol with their trigger finger off the trigger		
	Maintain muzzle discipline		
	Remove magazine		
	Run the slide several times to eject chambered round		
	Lock the slide to the rear		
	Physically and visually check the chamber and magazine well		
	Let the slide run forward		
	Return firearm to holster		
4	Demonstrate proficiency by shooting a passing score on the qualification standards		

Enter P or F only

CERTIFYING INSTRUCTOR(S) SIGNATURE(S) & OPOTC INSTRUCTOR #:

_____ **OPOTC #:** _____
INSTRUCTOR SIGNATURE

_____ **OPOTC #:** _____
INSTRUCTOR SIGNATURE

_____ **OPOTC #:** _____
INSTRUCTOR SIGNATURE

SCHOOL NAME: _____ **SCHOOL NO.:** _____

COMMANDER SIGNATURE: _____ **DATE:** _____

NO STAMPS / ORIGINAL SIGNATURES ONLY

OHIO PEACE OFFICER TRAINING COMMISSION
RANGE PROFICIENCY RECORD: HANDGUN

NAME: _____ AGENCY: _____

SCHOOL NAME: _____ SCHOOL NO.: _____

WEAPON MAKE: _____ MODEL: _____

HITS IN THE PREFERRED AREA (**PA**) COUNT AS A PLUS ONE (+1)

HITS IN THE NON-PREFERRED AREA (**NPA**), BUT INSIDE OF THE TARGET OUTLINE ARE A ZERO (0)

ROUNDS NOT FIRED (**NF**) ARE ZERO (0)

HITS OUTSIDE OF THE TARGET OUTLINE (**MISS**), OFF OF THE TARGET (**MISS**), OR FIRED OVER THE TIME LIMIT (**OT**) ARE A MINUS 1 (-1), EXTRA ROUNDS FIRED (**ERF**) ARE MINUS 1 (-1).

STAGE 1 PA: _____ NPA: _____ NF: _____ MISS: _____ OT: _____ ERF: _____

STAGE 2 2 HITS IN THE PREFERRED AREA, ONE HIT IN THE HEAD OR HIP

PA: _____ NPA: _____ NF: _____ MISS: _____ OT: _____ ERF: _____

STAGE 3A PA: _____ NPA: _____ NF: _____ MISS: _____ OT: _____ ERF: _____

STAGE 3B PA: _____ NPA: _____ NF: _____ MISS: _____ OT: _____ ERF: _____

STAGE 4 PA: _____ NPA: _____ NF: _____ MISS: _____ OT: _____ ERF: _____

STAGE 5 PA: _____ NPA: _____ NF: _____ MISS: _____ OT: _____ ERF: _____

STAGE 6 PA: _____ NPA: _____ NF: _____ MISS: _____ OT: _____ ERF: _____

SUB TOTALS: _____ MISS: _____ OT: _____ ERF: _____

TOTAL: _____ (PASSING IS A MINIMUM OF 20)

DATE TESTED: _____ PASSED: _____ FAILED: _____

_____ OPOTC #: _____ EXP.: _____
INSTRUCTOR SIGNATURE

_____ OPOTC #: _____ EXP.: _____
INSTRUCTOR SIGNATURE

_____ OPOTC #: _____ EXP.: _____
INSTRUCTOR SIGNATURE