

MAINE DEPARTMENT OF CORRECTIONS

LAW ENFORCEMENT OFFICER SAFETY ACT (LEOSA) APPLICATION & WAIVER FOR MDOC PROBATION OFFICERS WHO ARE NOT MCJA CERTIFIED

TYPE OR PRINT LEGIBLY - USE BLACK or BLUE INK ONLY

Please read the instructions on page two of this application.

LEGAL NAME: (Last, First, Middle)			INITIAL	
			RENEWAL	
RESIDENCE ADDRESS: (Street # and name including apartment / Lot #)		CITY	STATE	ZIP CODE
MAILING ADDRESS: (If different from above)		CITY	STATE	ZIP CODE
SOCIAL SECURITY NO.	CONTACT PHONE NUMBER	EMAIL ADDRESS IF AVAILABLE		
DATE OF BIRTH (MM/DD/YYYY)				
FORMER LAW ENFORCEMENT AGENCY INFORMATION (TO BE COMPLETED BY APPLICANT)				
Probation Office from which you retired & DATES OF SERVICE:				
ADDRESS	CITY	STATE	ZIP	PHONE

TRAINING INFORMATION (TO BE COMPLETED BY INSTRUCTOR)				
NAME OF MCJA CERTIFIED FIREARMS INSTRUCTOR				
ADDRESS	CITY	STATE	ZIP	PHONE () -
TYPE OF FIREARM USED (CIRCLE ONE ONLY): (ENTER MODEL TYPE)				
REVOLVER		SEMI AUTO		BOTH
QUALIFICATION DATE		RE-QUALIFICATION DATE:		
MCJA CERTIFIED FIREARMS INSTRUCTOR SIGNATURE:				

- Please be sure you have included all required documents with this application (see page 3).
- Application processing fee (Money order or cashier's check **ONLY**)

I SWEAR OR AFFIRM THAT THE INFORMATION ON THIS APPLICATION IS TRUE AND ACCURATE AND THAT I MEET THE REQUIREMENTS UNDER 18 USC 926C(c) as set out in MDOC Policy 3.33, Official Identification for Adult Community Corrections Staff, Department Law Enforcement Officers, Facility Staff & Probation Officers Who Perform Transports on Airplanes, and Qualifying Separated LEOSA Applicants

APPLICANT'S SIGNATURE:

DATE:

MAINE DEPARTMENT OF CORRECTIONS

**FEDERAL LAW ENFORCEMENT OFFICER SAFETY ACT (LEOSA) APPLICATION & WAIVER
FOR MDOC PROBATION OFFICERS WHO ARE NOT MCJA CERTIFIED**

I, _____, am a retiree of the Maine Department of Corrections and who before separation, 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 had statutory powers of arrest or apprehension and is eligible to attempt to qualify to carry a concealed firearm, pursuant to the Law Enforcement Officers Safety Act (LEOSA) of 2004 (18 U.S. Code §926C).

I recognize that the Maine Department of Corrections is not legally required to provide firearms qualification course or firearms instruction to retired staff who qualify for LEOSA. I understand that to do so, I will be required to meet the training and qualification standards of the State of Maine for active law enforcement officers to carry firearms.

I agree to release the Maine Department of Corrections and all its officials, employees, and agents from any and all claims, demands, liabilities, and causes of action, of any kind whatsoever, that are known or unknown and that are now existing or that may exist in the future, arising from or relating in any way resulting from my carrying and/or use of any weapon allowed under the Law Enforcement Officers Safety Act of 2004, including, but not limited to, all claims under any state or federal statutory or common law cause of action.

I acknowledge and understand that LEOSA certification does not give me any law enforcement authority whatsoever, no statutory or qualified immunity for my actions, no right to possess a firearm in violation of federal law, and no exemption from state laws restricting the possession of concealed weapons on state, local, or private property.

I have read and understand to all requirements of the LEOSA Act and MDOC Department Policy 3.33, Official Identification for Adult Community Corrections Staff, Department Law Enforcement Officers, Facility Staff & Probation Officers Who Perform Transports on Airplanes, and Qualifying Separated LEOSA Applicants.

APPLICANT SIGNATURE:

DATE:

WITNESS SIGNATURE:

DATE:

MAINE DEPARTMENT OF CORRECTIONS

FEDERAL LAW ENFORCEMENT OFFICER SAFETY ACT (LEOSA) APPLICATION & WAIVER FOR MDOC PROBATION OFFICERS WHO ARE NOT MCJA CERTIFIED

APPLICATION INSTRUCTIONS

1. Complete the firearms qualification course of fire with a MCJA certified firearms instructor. This is either the Board approved standard firearms qualification course, or the Board approved plain clothes qualification course.
2. Include the application fee (Money order or cashier's check ONLY) and mail the completed application to the:

**Commissioner
Maine Department of Corrections
111 State House Station
Augusta, ME 04330-0111**