

Dear Applicant,

Thank you for your interest in becoming a Nevada CCW Instructor. We always need good quality instructors to participate in this program.

Attached is the CCW Instructor's Packet that has the list of items we will need from you in order to review your application.

Please email us an electronic copy of your completed Lesson Plan to [ccwdetail@lvmpd.com](mailto:ccwdetail@lvmpd.com). I will review the Lesson Plan and confirm it meets the minimum requirements of the Nevada Sheriffs and Chiefs Association (NVSCA). Once your Lesson Plan is reviewed and accepted you will receive a letter approving you as an Instructor. The approval of your Lesson Plan does NOT make you a "Certified LVMPD Instructor" or allow you to utilize any LVMPD Badges or icons in your advertisement or publications.

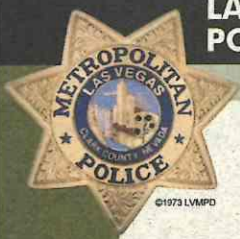
Again, thank you for your interest in becoming a CCW instructor.

Respectfully,

Brian Hibbetts  
Sergeant  
LVMPD CCW/Gun Disposition Detail  
702-828-3483 Office

10-08-2020





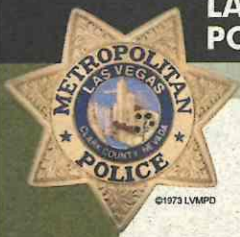
## DOCUMENTATION THAT MUST BE SUBMITTED IN ORDER TO BECOME A CCW INSTRUCTOR

1. **Business License** – A business license needs to be obtained from the jurisdiction where your class will be held (Clark County, City of Las Vegas, City of Henderson, etc.) and the scope of the license must state Firearms Instructor.
2. **Certificate of Education/Training** – Qualifications/certificates to instruct. This certification can come from the NRA, U.S. Military, law enforcement, or other national firearms or shooting organizations.

*Note: If a potential instructor is going to use NRA certification they must possess the certificate and valid instructor card for “Personal Protection Outside the Home”.*

3. **Resume** – A comprehensive resume of your experience in firearms and firearms training, to include your personal information and why you are a good candidate to be a CCW instructor.
4. **Lesson Plan** – A complete and detailed copy of your lesson plan including approved test, a copy of the course certification, and all relevant handouts and learning materials.
5. **Waiver** – Applicants will provide a signed waiver authorizing the Las Vegas Metropolitan Police Department to perform a criminal history check.
6. **Letter of Agreement** – All instructors must sign and agree to abide by all requirements of the Nevada Sheriff’s and Chief’s Association and the Las Vegas Metropolitan Police Department.



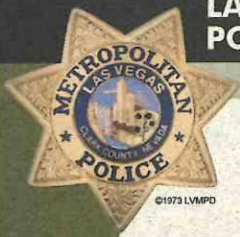


The course outline should have as a minimum, but not limited to, instruction in the following subjects:

- § Handgun Knowledge and Basic Firearm Safety.
- § Safe Firearm Storage.
- § Mental Awareness and the Defense Mindset.
- § Aiming and Firing Techniques.
- § Shooting Positions.
- § The laws of this State Relating to the Use of Firearms, Concealed Carry of Firearms, and Liability.
- § Avoiding Confrontations Outside the Home.
- § Responding to an Attack Outside the Home.
- § The Aftermath of a Defensive Shooting Outside the Home.

The resume should show your training and experience such as NRA firearm training, military firearm training, firearm training schools, competition shooting, etc.





**AUTHORIZATION TO RELEASE CRIMINAL HISTORY RECORD**

**TO WHOM IT MAY CONCERN:**

**I hereby give my written consent for any criminal justice agency to disseminate my record of criminal history to the Las Vegas Metropolitan Police Department for the purpose of becoming a sheriff-approved firearms instructor.**

**I understand that a record of criminal history means the information contained in records collected and maintained by agencies of criminal justice, consisting of descriptions, which identify the subject, notation of arrests, detention, indictments, court records and reports, formal charges and disposition of charges including dismissals, acquittals, convictions, correctional records, and any other criminal justice records, reports or information.**

**I hereby release, discharge, exonerate and hold harmless the Las Vegas Metropolitan Police Department, its agents and representatives and any person furnishing information, from any and all liability of every nature and kind arising out of the inspection of my records of criminal history.**

**This authorization and request is given freely and without duress, voluntarily waiving any protection against unauthorized disclosure of information under the Privacy Act and any other legal provisions.**

**I declare under penalty of perjury under the laws of the State of Nevada, that the forgoing is true and correct.**

\_\_\_\_\_ **Applicant's Signature** \_\_\_\_\_ **Date**

\_\_\_\_\_ **Print Full Name**

\_\_\_\_\_ **Sheriffs' Employee** \_\_\_\_\_ **Date**

**NOTE: A PHOTOCOPY REPRODUCTION OF THIS REQUEST SHALL BE FOR ALL INTENTS AND PURPOSES AS VALID AS THE ORIGINAL.**





## Nevada Concealed Firearms Training Standards

### LETTER OF AGREEMENT

1. I, the perspective firearms instructor, have read and understand the required CCW standards as outlined by the Nevada Sheriff's and Chief's Association pursuant to the authority given to the Association in NRS 202.3657.
2. I understand it is my responsibility as a CCW Certified Firearms Instructor to maintain the minimum standards and the Nevada CCW Proficiency Test as outlined by the Nevada Sheriff's and Chief's Association.
3. I understand it is my responsibility to administer the written and live fire/range Proficiency Tests, which both requires a minimum of 70% to pass. Evidence of the administration of these proficient tests will be indicated on the student's certificate as "PASS or FAIL".
4. I understand it is my responsibility as a CCW certified Firearms Instructor to inform the Las Vegas Metropolitan Police Department of any changes that might affect my eligibility to instruct firearms classes, including any address or phone number changes.
5. I understand it is my responsibility as a CCW Certified Firearms Instructor in Clark County to provide the Las Vegas Metropolitan Police Department with a current Business License and Certificate of Instruction.
6. I understand it is my responsibility as a CCW Certified Firearms Instructor to comply with all of the rules and regulations required by the Las Vegas Metropolitan Police Department, the Nevada Sheriff's and Chief's Association and the Nevada Revised Statutes.
7. I authorize the Las Vegas Metropolitan Police Department to perform a criminal background check.

Signature of instructor: \_\_\_\_\_

Printed name of instructor: \_\_\_\_\_ Date: \_\_\_\_\_

10-08-2020

