



SPOKANE COUNTY SHERIFF'S OFFICE
TRAINING ANNOUNCEMENT



Designated Marksman



DATE/TIME: August 29th – 30th, 2013 **0630-1400**
(Bring a sacked lunch)

LOCATION: SCSO Training Center
10319 E. Appleway
Spokane Valley, WA 99206
(Live-Fire at the Mica Range)

COST: \$295 (Payment due at time of registration)

DESCRIPTION:

The Designated Marksman (DM) course fills the gap between the police patrol rifle and the precision marksman (sniper). This two-day course is designed for the police officer, deputy, or state trooper who works suburban and rural areas; who may have a long wait time for SWAT; and who may have to make a precise shot at distance.

The class emphasizes the use of a low (1 to 5) powered scope, mounted on an AR platform or on a suitable bolt-action rifle. This is not close-quarter battle; it reflects the actual use most officers make of the carbine. Position shooting is practiced and ranges run from ten to one hundred yards.

REQUIREMENTS: a suitable AR-type or bolt-action rifle; a quality optic with magnification in the 1.5X, 2.5X, 2-6X, 1.5-5X, etc. range; 300 rounds of duty ammo; knee and elbow pads (recommended); duty handgun with 100 rounds; normal range equipment. Questions, contact Jeff Hall (jeff@forceoptions.net).

INSTRUCTOR: The class will be led by Jeff Hall, owner of Force Options, LLC. Hall is a retired lieutenant from the Alaska State Troopers. He is an NRA staff instructor, SWAT and military veteran, and martial arts grandmaster.

REGISTRATION:

To register, complete the attached application and return to Deputy Jeremy Jeske by fax (509) 477-6975 or email jbjeske@spokanesherriff.org. Make checks payable to **Force Options, LLC** and mail to SCSO, ATTN: Deputy Jeremy Jeske, 1100 W. Mallon, Spokane, WA 99206.



Revised 5/13

Spokane County Sheriff's Office Training Unit

Application Form
GENERAL COURSE APPLICATION

PLEASE TYPE OR PRINT CLEARLY

1. GENERAL INFORMATION

Applicant's Name: _____ (Last) _____ (First) _____ (Middle)

Title/Rank: _____ Applicant's Personnel Number: _____ Male
 Female

Primary Duty Assignment: _____ Agency: _____

Agency Phone: _____ Agency Fax: _____ Applicant's Agency E-Mail Address: **MANDATORY – PRINT OR TYPE**
_____ @ _____

Agency Mailing Address: _____ (Street or PO Box) _____ (City) _____ (Zip)

IF THIS APPLICANT REQUIRES SPECIAL CLASSROOM ACCOMODATION, PLEASE MAKE REQUEST ON A SEPARATE SHEET AND ATTACH TO THIS APPLICATION.

2. COURSE INFORMATION

Course Title: _____ Location of Course: _____

Course Date(s): _____

3. **MANDATORY-MUST BE COMPLETED TO BE CONSIDERED FOR SELECTION**

In determining **eligibility** of this **applicant**, the Spokane County Sheriff's Office will consider any special need or purpose which the applicant or his/her agency may have regarding the requested course or training. Comments:

5. APPLICANT PRIORITY (MANDATORY!) → If submitting more than one application for this course, check the priority of **THIS** applicant:
1 2 3 4 5

6. TRAINING COORDINATOR EMAIL ADDRESS (MANDATORY!) → _____ @ _____ **Confirmation is sent via email, please make sure this section is complete.**

7. AUTHORIZATION

Agency Representative Authorizing Attendance: _____ Name	_____ Title	For SCSO Use Only _____ _____ _____ _____
_____ Signature	_____ Date	

Return completed application form to: Deputy Jeremy Jeske, Spokane County Sheriff's Office Training Center, 10319 E. Appleway, Spokane Valley, WA 99206. Applications may also be faxed to (509) 477-6975 or sent as an email attachment to jbjeske@spokanesherriff.org. For more information regarding the application process, please call (509) 477-3211.

Check out more training opportunities at www.spokanecounty.org/sheriff/training.