**LFSTP applications must be submitted with a lesson plan in order to be considered for funding.** Applicant agencies may submit their own plan or utilize this template.

|  |
| --- |
| **Local Firearms Safety Training Program (LFSTP) Course Lesson Plan** |
| **Agency Name:** | Click or tap here to enter text. |
| **Course Title:** | Click or tap here to enter text. |
| **Course Length:** | Click or tap here to enter text. |
| **Prepared By:** | Click or tap here to enter text. | **Approved By:** | Click or tap here to enter text. |
| **Date Prepared:** | Click or tap here to enter text. | **Date Approved:** | Click or tap here to enter text. |
|  |
| **Agenda** | **Hours** |
| **Location: Classroom** **Address:** Click or tap here to enter text.1. **Topic(s):** Click or tap here to enter text.

**Grant-Funded Materials:** Click or tap here to enter text.1. **Topic(s):** Click or tap here to enter text.

**Grant-Funded Materials:** Click or tap here to enter text.1. **Topic(s):** Click or tap here to enter text.

**Grant-Funded Materials:** Click or tap here to enter text. | # of Hours |
| **Location: Gun Range****Address:** Click or tap here to enter text.1. **Hands-On Training:** Click or tap here to enter text.

**Grant-Funded Materials:** Click or tap here to enter text. | # of Hours |
| **Location: Range Simulator****Address:** Click or tap here to enter text.1. **Hands-On Training:** Click or tap here to enter text.

**Grant-Funded Materials:** Click or tap here to enter text.*.* | # of Hours |