MERCER COUNTY POLICE ACADEMY
WILL
BE HOSTING:

<u>METHODS OF INSTRUCTION COURSE (M.O.I.)</u>

Course Description: This five-day Police Training Commission certified course is designed for officers who plan to instruct at police academies and/or their respective agencies. During this 5-day, 40 hour course, the student will learn to select appropriate teaching methods; establish goals and performance objectives; and construct lesson plans. In addition, the student will learn to formulate various types of test questions and evaluate their teaching proficiency. Each student will be required to plan, prepare and present two lessons based on police-related topics. The first is a lesson/lecture of 10 minute duration and the second is a lesson plan and lecture of 20 minutes. The twenty-minute lesson plan and lecture requires the use of training aids. *(Class size is limited (15).*

The presentations will be evaluated by the student, the class members and the instructors. The methods of instruction course will also include an overview of the principles of learning and classroom management as well as instruction in the use of various training aids including powerpoint presentations.

Date:	**October 31- November 4, 2011 (5-day course)**
Time:	8:30 a.m. – 4:30 p.m.
Fee:	No Fee- Mercer County Agencies $50.00 Out of County Agencies Check or Purchase Orders Payable to: **Mercer County Police Academy** **No Cash Accepted**
Attire:	Business Casual or Uniform of the Day
Instructor(s):	Mercer County Police Academy Staff and Adjunct Instructors
Location:	Mercer County Police Academy, West Windsor Campus **E/T Building, Room 207**
Register:	Complete this registration form and mail or fax to: **Mercer County Police Academy** **At Mercer County Community College** **Engineering and Technology Building 1st Floor, Rm. 131** **1200 Old Trenton Road, West Windsor, NJ 08690** **(609) 584-2302 office** **(609) 584-2306 fax**

<u>**Please print clearly or type below.**</u> (Make copies of this form for additional students)

NAME:_____RANK:_____

DEPARTMENT:_____PHONE #:_____

ADDRESS:_____

APPROVED BY:_____   _____
                         (Chief or Designee)   (Date)