



MERCER COUNTY POLICE ACADEMY WILL BE HOSTING:



PHYSICAL CONDITIONING INSTRUCTOR COURSE

Course Description: The Physical Conditioning Instructor Course is a 40-hour course conducted over five days. The course is designed to prepare law enforcement officers to implement and teach a physical fitness program in their agencies or in a police academy. It is a prerequisite for certification by the Police Training Commission as a Physical Conditioning Instructor. The Course requires participation in practical exercises as well as classroom instruction on fitness related topics. **Class size is limited (18). You MUST attend every day, there are no excused absences.**

Required Equipment - Appropriate exercise clothing should be worn to class. Extra exercise clothing and shower amenities must be brought every day. Shower facilities will be provided after physical training.

NOTE: EACH STUDENT MUST PASS THE PHYSICAL CONDITIONING TESTING REQUIREMENTS FOR RECRUITS set by the Police Training Commission. Also, This is a physically demanding course requiring attendees to fully participate in the following areas: fitness assessment, strength conditioning, running and be prepared to exercise each day of the course.

Date: August 17-21, 2026 Time: 7:00 am – 3:00 pm

Note: Aug. 17, 2026 (1st Day): Class will meet at the Police Academy Classroom, E/T Bldg., Rm 207 and will perform Physical Conditioning Testing Requirements immediately after.

Fee: No Fee- Mercer County Agencies \$50.00- Out of County Agencies
Checks or Purchase Orders payable to : Mercer County Police Academy Trenton, NJ

Instructor(s): Mercer County Police Academy Staff

Location: Mercer County Police Academy @ Mercer County Community College
1200 Old Trenton Road
West Windsor, NJ 08690
E/T Building, Room: E/T-207

Register: Complete this registration form and Email to:
mcpa@mercercounty.org

*Please note you will not be registered for this course **unless** you receive a confirmation email from academy staff

Please print clearly or type below. (Make copies of this form for additional students)

NAME: _____ RANK: _____

DEPARTMENT: _____ PHONE #: _____

ADDRESS: _____

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