



MISSOURI SHERIFFS' ASSOCIATION

Serving Missouri Justice Since 1945

DATE

September 18 - 21, 2023

8:00AM – 5:00PM

(Ends at noon Sept. 21)

LOCATION

Franklin County Sheriff's Office

1 Bruns Lane

Union, MO 63084

COST

Contracted Agencies: \$175

Non-Contracted Agencies: \$350

DEADLINE

September 11, 2023

Pre-registration is required.

Students are responsible for all lodging, meals, and transportation

REGISTRATION

On-line registration preferred
www.mosheriffs.com/training-calendar

For those who do not register on line, email registration form to:
gina@mosheriffs.com

Field Training Officer Course Post #10029

Field Training Officers have significant additional responsibilities over and above their law enforcement duties. Not only are they responsible for the performance of general law enforcement duties, they are also responsible for guiding recruits through a comprehensive curriculum that requires the blending of knowledge, skills, and abilities, as well as the good judgment of when, where, and how to apply them.

This course provides the FTO with the essential tools to apply techniques of coaching and role modeling while giving encouragement and direction to the recruit. It is based on the highly regarded San Jose, California Police Department FTO model.

Course Topics

- Critical Elements of the Field Training Evaluation Program
- Principles of Learning
- Adult Learning Styles
- Effective Communication
- Ethics
- Field Training Officer Roles and Responsibilities
- Situational Leadership
- Counseling Troubled Employees
- Probationary Officer's Checklist
- Daily Observation Reports
- Standardized Evaluation Guidelines
- Common Performance Appraisal Errors
- Training Liability

For additional information contact:

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Jefferson City, MO 65109
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MOSHERIFFS.COM

STATE LICENSED • PROFESSIONAL STAFF • STATEWIDE TRAINING



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REGISTRATION FORM

COURSE INFORMATION

Title: _____

Date: _____ Time: _____

Host Agency: _____

Location address: _____

Instructor: _____

ATTENDEE INFORMATION

Agency Name: _____

Contracted: (Yes/No) _____ Number Attending: _____

Attendee Name: _____ Email: _____

Attendee Name: _____ Email: _____

Attendee Name: _____ Email: _____

Attendee Name: _____ Email: _____

COST INFORMATION

Contracted Agency\$ _____ / per person \$ _____

Non-Contracted Agency.....\$ _____ / per person \$ _____

PAYMENT METHODS

Bill my credit card. VISA _____ MC _____ DISCOVER _____
_____ Exp _____
3-digit security code _____ (Located on back)

Enclosed is a check/money order. Check # _____

Total Enclosed \$ _____

Signature _____

Send Registrations To