

# MISSOURI SHERIFFS' ASSOCIATION TRAINING ACADEMY

Serving Missouri Justice Since 1945

#### DATE:

April 22 – 26, 2024 8:00 a.m. – 5:00 p.m.

#### LOCATION:

Taney County Sheriff's Office 266 Main Street Forsyth, MO 65653

#### COST:

Contracted Agency: \$250 Non-Contracted Agency: \$500

DEADLINE: April 15, 2024

Students are responsible for all lodging, meals and transportation expenses.

#### **REGISTRATION:**

Online: mosheriffs.com/training

gina@mosheriffs.com FAX: 573-635-2128

#### FOR MORE INFORMATION:

Jeanne Merritt
Jeanne@mosheriffs.com
573-529-6900

#### **REFUND POLICY**

50% refund if canceled within 48hours of the start date. ALL COST DUE IF NOT.

6605 Business 50 West Jefferson City, MO 65109 573.635.5925 | Fax 573.635.2128

MOSHERIFFS.COM

## **Basic Supervision**

POST #10461

This course is designed to provide the student the necessary skills and knowledge to perform the formal functions of supervision to include planning, reporting, improving, directing, and evaluating (PRIDE).

It is no secret that many people, if not most, leave their jobs because of poor supervision. Thus, other topics covered in the training will address "informal" functions of supervision to include human relations concepts and skills; leadership and motivational principles; and supervisor/subordinate relationships.

### Who Should Attend:

Current leaders and those who want to prepare themselves for future leadership positions in a public safety agency. Those interested in personal and professional growth.

This training qualifies for thirty-six (36) hours of POST Continuing Law Enforcement Education Credit through the Missouri Sheriffs' Association, a POST licensed continuing education provider.

This program may be canceled if registrations are not sufficient. Students are responsible for all lodging, meals, and transportation expenses.

#### FOR MORE INFORMATION CONTACT:

Jeanne Merritt at 573-529-6900 or email at jeanne@mosheriffs.com

STATE LICENSED . PROFESSIONAL STAFF . STATEWIDE TRAINING



## **REGISTRATION FORM**

COURSE INFORMATION	
Class:	
Date:	
County:	
Training Host:	
Training Address:	
ATTENDEE INFORMATION	
Agency Name:	
Attendee Name:	
Attendee Name:	Email:
Attendee Name:	Email:
Attendee Name:	Email:
COST INFORMATION	
CONTRACTED AGENCY\$/per person. 1	Fotal \$
NON-CONTRACTED AGENCY\$/per person. 1	Fotal \$ RETURN BY EMAIL, FAX OR MAIL TO:
PAYMENT METHODS	<i>ATTN:</i> Gina Kauffman <i>FAX:</i> 573-635-2128
Bill my credit card.	gina@mosheriffs.com  Missouri Sheriffs'
#E	Association 6605 Business 50 West
3-digit security code (Located on back of card)  Inclosed is a check/money order. Check #	Jefferson City, MO 65109
Total \$	NO REFUND IF NO SHOW. 50% REFUND IF CANCELLED WITHIN 2 DAYS BEFORE CLASS STARTS.
Signature	CLASS STARTS.