**MTU ??**

**In-Service Training Lesson Plan**

**Course Title**

**DATES:** Click or tap here to enter text.

**LOCATION OF TRAINING:** Click or tap here to enter text.

**TOTAL TRAINING HOURS:** Click or tap here to enter text.

**CLASSROOM TRAINING HOURS:** Click or tap here to enter text.

**SCENARIO BASED TRAINING HOURS:** Click or tap here to enter text.

**INSTRUCTORS:** Click or tap here to enter text.

**METHOD OF INSTRUCTION: (Check all that apply)**

**In-Person  On-line  PowerPoint  Scenario Based**

**TRAINING REFERENCES OR HANDOUTS:** Click or tap here to enter text.

**TRAINING AIDS REQUIRED:** Click or tap here to enter text.

**LESSON PLAN CREATED BY:** Click or tap here to enter text.

**DATE LESSON PLAN CREATED:** Click or tap here to enter text.

**TRAINING MANDATES: (To be completed by Training Coordinator)**

**Annual:**

**Legal Update  Officer Wellness & Mental Health**

**Emergency Medical Response  Crisis Intervention**

**Every 3 Years:**

**Child Abuse/Neglect  Civil Rights  Constitutional Use of L.E. Authority**

**Cultural Competency  Domestic Violence  Human Rights**

**Procedural Justice  Trauma Informed Response/Sexual Assault Inv.**

**Use of Force**

**STUDENT PERFORMANCE OBJECTIVES:**

**At the end of this course the student will: (List measurable training objectives in bulleted form here)**

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**INTRODUCTION: Personal introduction of instructors:**

Click or tap here to enter text.

**COURSE DESCRIPTION:**

Click or tap here to enter text.

**LESSON TIE-IN TO REVELANT SOG’S:**

Click or tap here to enter text.

**BODY:**

Click or tap here to enter text.

**SUMMARY:**

Click or tap here to enter text.

**TESTING COMPONENT: How will you test that students met the performance objectives of the course?**

Click or tap here to enter text.

**EVALUATIONS: Distribute evaluation forms if applicable.**