**Executive Institute/MTU Course Certification Application** 

1. Course Vendor/Instructor:	2. Course Title:		3. Hours in Cours		
4. Course objective and narrative description (use additional pages, if necessary):					
5. Method of evaluating stated objectives (if applicable):					
6. Method of presentation (indicate all techniques used): □ Lecture □ Demonstration □ Simulation □ Scenario/Role Playing □ Conference □ Online □ Other					
7. I believe the reviewed and submitted course materials meet the mandated training guidelines for (check all that apply):					
Mandate			Total Hours Scenario-Based Hours		
□Civil Rights					
□ Constitutional/Proper Use of LE Authority					
Crisis Intervention					
Cultural Competency					
Emergency Medical Response					
Firearm Restraining Order Act					
Human Rights					
Legal Updates					
□ Officer Wellness and Mental Health					
Procedural Justice					
$\Box$ Psychology of Domestic Violence					
$\Box$ Reporting Child Abuse and Neglect					
Sexual Assault Trauma Informed Response					
$\Box$ Use of Force (excluding below subsections)			NOT APPLICABLE		
$\Box$ De-escalation Techniques					
□ High-risk Traffic Stops					
□ Law concerning stops, searches, and use of force					
Officer Safety Techniques					
Specialized Training			NOT APPLICABLE		
$\Box$ Crisis Intervention Team Training (CIT)					
$\Box$ Lead Homicide Investigator					
$\Box$ School Resource Officer (SRO)					
$\Box$ Active Threat Response					
$\Box$ Juvenile Law					
□ Officer & Youth Interaction					
□ Sexual Assault Investigator Training					
8. Is this course copyrighted or license protect	ed? $\Box$ Yes $\Box$ No		If yes, then complete <b>Form X</b>		
9. I certify that the information contained herein is true and complete to the best of my knowledge and the training course(s) has been vetted pursuant to our MTU policy and is/are of sufficient quality for Board certification. I authorize investigation of all facts contained in this Application and agree to provide any additional information as may be required by the Board. I understand that false or misleading information given in this Application or interview/s may result in immediate decertification of this course and/or any course offered by the Applicant.					

MTU Coordinator or Chairman: \_\_\_\_\_

Date of Request: \_\_\_\_\_