

# 2018 JUNIOR POLICE ACADEMY



**Chief Brian Spring**

**Academy Dates:** July 9<sup>th</sup> – July 13<sup>st</sup>

**Eligibility:** Pequannock Students that have graduated from the 6th, 7th or 8th grade.

**Location:** Pequannock First Aid Squad  
530 Newark Pompton Turnpike

**Academy Fee:** This is a **FREE** event for Pequannock Township residents. It is sponsored by the Pequannock Police Department and Pequannock P.B.A. Local 172.

Applications will be accepted *starting May 15<sup>th</sup>, 2018 (9:00 a.m.)* at the Pequannock Police Department Front Desk. The application can be obtained from the Pequannock Police Department Front Desk or downloaded from [www.peqtwp.org](http://www.peqtwp.org).

Any questions regarding the Academy should be directed to:

**Detective Steven Cicchetti: [scicchetti@peqtwp.org](mailto:scicchetti@peqtwp.org)**

**or**

**(973) 835-1700 ext. 119**

Please **DO NOT** call the Police Department inquiring about your child's application status.

This year's Junior Police Academy will be held at the Pequannock First Aid Squad located at 530 Newark Pompton Turnpike (behind Town Hall). Enrollment will be restricted to 40 recruits. All applicants must be Pequannock residents who have graduated either 6th, 7th or 8th grade. Applications will be accepted on a first come, first served basis. The first 40 applications received will determine who is accepted to this year's recruit class. Any applications received after the first 40 will be placed on a waiting list. If any of the first 40 applicants decide not to participate, the waiting list will then be used to fill any openings. The waiting list will also function on a first come, first served basis.

The Academy will be under the direction of Det. Steven Cicchetti, School Resource Officer and the Police Department's Juvenile Officer. Also assisting will be members of the Police Department's Patrol Division, Detective Bureau and Firearms Unit. Daily instruction will include various officers from differing positions and experience within the Police Department and Officers from other agencies.

Our objective is a week of education and fun through a Police Academy format. The curriculum will include various presentations from guest law enforcement agencies, hands-on practices and physical training to give the recruits an idea of what is involved in becoming a Police Officer.

The daily schedule is from 9:00 a.m. \*SHARP\* to 3:00 p.m. (WE EXPECT ALL RECRUITS TO BE ON TIME). Recruits are to be dropped off at Pequannock First Aid Squad. **Transportation to and from the Academy is the responsibility of the recruit's parent or guardian. Please be prompt when dropping off and picking up your children.**

**The Junior Police Academy will culminate in a graduation ceremony in the Pequannock Township Municipal Court on Friday, July 13<sup>st</sup> at 2:00 p.m. sharp.**

Each recruit's family is invited and encouraged to attend the ceremony.

**Each participant is asked to bring a bag lunch for the Academy Monday through Thursday (Lunch is provided on Friday). Dress for the Academy should be comfortable, as there will be daily exercises performed. Recruit T-shirts will be provided.**

We are hopeful that the interaction that will take place between your children and the members of our police department will have a positive effect on all involved. As police officers, we thoroughly enjoy participating in this program each year and look forward to working with your children.

Please print neatly when completing the application as illegible applications will be rejected.

***Any application that contains false information or is not filled out completely will be disqualified.***

# APPLICATION

Please fill out the following requested information completely. Also, please print all answers clearly.

***Any false, incomplete or illegible information will exclude the applicant from participating in this program.***

Student's Name: \_\_\_\_\_  
(First Name) (Last Name)

Home Address: \_\_\_\_\_

Sex: (M or F) \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

School Name: \_\_\_\_\_ Next Grade Attending: \_\_\_\_\_

(Please circle your child's ***appropriate size shirt*** )

**Adult Tee Shirt Size:** S M L XL

Have you previously attended the Junior Police Academy? \_\_\_\_\_ If yes, what year? \_\_\_\_\_

\*\*\*\*\*

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Number: \_\_\_\_\_  
(Home) (Work or Cell)

Emergency Contact Name: \_\_\_\_\_  
(First Name) (Last Name)

Emergency Contact Number: \_\_\_\_\_  
(Home) (Work or Cell)

Relationship to Child: \_\_\_\_\_

<b>Are there any persons with whom contact with your child is prohibited?</b>	
<b>If yes, please list:</b>	

# CODE OF CONDUCT

- Recruits will refrain from physical and verbal violence towards other recruits and academy staff.
- Recruits will act in a professional manner at all times and follow directions from the academy staff.
- Recruits will wear the uniform supplied, along with athletic sneakers during each academy day.
- Recruits will wear their uniforms appropriately and in accordance with the academy rules.
- Recruits will refrain from vulgar, offensive or threatening speech.
- Recruits will follow all the rules and regulations as directed by the academy staff.
- Recruits will refrain from bullying, teasing or harassing other recruits.
- Recruits will arrive promptly on each morning of the academy.
- Recruits will not be allowed to bring iPods, MP3 players, video games, or other electronic gaming or music devices to the Academy.
- Cell phones are allowed but must remain off or silent and will only be used for emergencies.
- Any injuries or illnesses suffered by the recruit should immediately be brought to the attention of an instructor.
- Any act or threat of physical violence towards another recruit or staff member will result in the recruits' immediate removal from the program.
- ***Recruits who violate any of the Academy rules will be expelled from the program.***

## Parent / Guardian to Complete

I \_\_\_\_\_ have reviewed the Code of Conduct with my child and we understand and agree to abide by the rules as outlined above. It is understood that any violation of these rules will result in your child's removal from the program.

Parent/Guardian Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Authorization and Release

The undersigned parent/guardian, understanding all activities and requirements, requests the opportunity and privilege to have his/her child participate in the Pequannock Police Department's Junior Police Academy. The undersigned agrees to have his/her child obey any and all directives or orders of any member of the Pequannock Police Department while he/she is engaged in any and all activities relating to the Junior Police Academy, as well as strictly adhere to any departmental safety rules and/or regulations.

The undersigned further acknowledge that the privilege of participating in this program may be rescinded at any time during the course of the Junior Police Academy as a result of improper behavior or other factors that may be detrimental to the safety or well-being of any other participants or instructors, and the decision to rescind this privilege is in the sole and absolute discretion of the police officers involved. Furthermore, the undersigned acknowledges receipt of the instructional and code of conduct pages of this application and certifies that he/she has reviewed these pages with his/her child and agrees to abide by those instructions and rules.

The undersigned certifies that their son/daughter has graduated the 6th, 7th or 8th grade and is a resident of Pequannock Township; that all of the information contained in this application is correct and truthful to the best of my knowledge; that I have read the above instructions and agree to abide by these regulations; and that I have signed this authorization and release of my own free will.

The undersigned also understands that the Junior Police Academy generates interest from the news media, both print, internet and televised, and authorizes the release of my child's image for use in any news media story relating to the Junior Police Academy. I also authorize the release of my child's image (not name) for use in any and all presentations or other social media to be used for or by the Pequannock Township Police Department and Pequannock P. B.A. regarding this program.

**Parent/Guardian Name:** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

# Medical Waiver/Release

Please fill out the following requested information completely. Please print all answers clearly.

*Any false, incomplete or illegible information will exclude the applicant from participating in this program.*

Does your child suffer from any medical conditions including allergies: \_\_\_\_\_ if yes, please explain.

---

---

---

Does your child require any medication on a daily or emergent basis? \_\_\_\_\_ if yes, please explain.

---

---

---

Are there any other special needs that the staff of the Junior Police Academy should be aware of?

---

---

\*\*\*\*\*

I, the undersigned parent/guardian of \_\_\_\_\_ states that the above health history information provided to the Pequannock Department is true and that my child is physically able to participate in the Junior Police Academy. I, the undersigned parent/guardian, also hereby releases and forever discharges the Township of Pequannock, the Pequannock Police Department and all of its officers, and any other agents or employees of participating agencies, from all claims and causes of action as a result of personal injuries, damages or other losses of any nature whatsoever, which may result or occur at any time while the child of the undersigned is participating in any of the activities of the Junior Police Academy. I further understand that any and all medical costs related to any injuries will be the sole responsibility of the undersigned parent/guardian.

I hereby certify that \_\_\_\_\_ is of satisfactory health and has no underlying medical conditions that would prohibit him/her from participating in physical training exercises performed during the course of the Pequannock Junior Police Academy.

**Parent/Guardian Name:** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_