## 2025 JUNIOR POLICE ACADEMY



#### **Chief Daniel Comune**

**Academy Dates:** July 14<sup>th</sup> - July 18<sup>th</sup> from 9:00 AM to 3:00 PM

**Eligibility:** Pequannock students that have graduated from the 6<sup>th</sup>,

7<sup>th</sup> or 8<sup>th</sup> grade as of June, 2025.

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

**Academy Fee:** This is a **FREE** event for Pequannock Twp. residents. It is

sponsored by the Pequannock Twp. Police Department and the

Pequannock P.B.A. Local #172

Applications must be handed in at the Pequannock Police Department Dispatch Desk. They will be accepted on a first come, first served basis for students in good standing. You will be notified via mail of your child's acceptance into the academy at the conclusion of the application process.

For further information, please contact:

S.R.O. William Juliano

wjuliano@peqpolice.org

973-835-1700 xl73

Please **DO NOT** contact the Police Desk with questions regarding your child's application status

The Junior Police Academy will be held from **July 14-18** at the Pequannock First Aid Squad located at 530 Newark Pompton Turnpike (behind Town Hall). Enrollment will be limited to 40 recruits on a first come, first served basis for students in good standing. All applicants must be Pequannock Township residents who have completed 6<sup>th</sup>,7<sup>th</sup> or 8<sup>th</sup> grade as of June 2025. Any applications received after the first 40 will be placed on a waiting list which will be utilized if any of the original applicants decide to withdraw.

The Academy will be under the direction of School Resource and Juvenile Officer, Det. William Juliano. Daily instruction will be provided by various officers in the Patrol Division, Detective Bureau and Traffic Bureau as well as demonstrations from members of other public safety agencies including: Morris County Sheriff's Office, Morris County Park Police, Pequannock Fire Department, Pequannock First Aid Squad and Atlantic Air Medical Unit.

The objective of the Academy is to provide a week of education, activity and fun in a Police Academy format. The curriculum will include various presentations from our department and other public safety agencies to include: Patrol Operations, Crime Scene Investigation, Fire Safety, First Aid, K-9 Demonstration, Bomb Squad, Sheriff's Emergency Response Team (SERT), Medivac landing, and various other exciting activities. There will be a tour of the County facilities including the Morris County Youth Detention Center and the Morris County Sheriff's Office CSI Unit. We hope that recruits will learn what it is like to be a Police Officer through hands-on and physical training in a fun and educational environment.

The Academy will begin promptly at **9:00** am and end at **3:00** pm each day. Transportation to and from the academy is the responsibility of the recruit's parent or guardian. Please be prompt at drop-off and pick-up times.

There will be a graduation ceremony for recruits at the culmination of the program on **Friday July** <sup>18th</sup> at 2:00 pm at 530 Newark Pompton Turnpike. Parents and Family members of the recruits are welcome and encouraged to attend.

Recruits are asked to bring a bag lunch to the academy Monday through Thursday with a Pizza lunch provided on Friday. Athletic attire is recommended as there will be daily physical training exercises. T-shirts and shorts will be provided for each recruit.

We are hopeful that the interaction that will take place between your children and the members of the Pequannock Twp. Police Department will have a positive impact on all who are involved. We thoroughly enjoy participating in this program and providing this program to the public each summer.

Please print neatly when completing the following application.

Any application that contains false information or is incomplete will be disqualified.

# **2025 JUNIOR POLICE ACADEMY APPLICATION**

Please print clearly and fill out the following information completely.

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

Applicant's Name:	(First)				(Last)		
Home Address:							
Date of Birth:		Age:			_	Sex:	
School Name:			_	Next G	rade Atte	nding:	
(Please c	ircle your child's	appro	opriat	e size	shirt &	z shorts)	
	Adult T-Shirt Size:	S	M	L	XL		
	Adult Shorts Size:	S	M	L	XL		
Have you previously attended  *********************************							
Parent/Guardian Name:							
Phone Number:	(Cell)					(Work/Home)	
Email Address:							
Emergency Contact Name:							
Emergency Contact Number:							
	(Cell)					(Work/Home)	
Relationship to Child:							
Are there any persons with wh						If ves please	provide the

name(s) and explain the circumstances on the back of this page.

### **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/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 be brought to the attention of the instructors immediately.

Any act or threat of physical violence towards another recruit or staff will result in the recruit's 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 removal of that child immediately.

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 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 <i>illegible information will exclude the applicant from participating in</i> medical conditions including allergies if yes, please explain.	this program. Does your child suffer from any
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 Ac	cademy should be aware of?
**************	*********
I, the undersigned parent/guardian of	states,
that the above health history information provided to the Pequannock	Police 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 a	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	m participating in physical training
exercises performed during the course of the Pequannock Junior Police	ce Academy.
Parent/Guardian Name:	
Signature	Date