

Bellevue Police Department Teen Citizen's Police Academy

Orientation: June 9th, 2011 - 6 p.m.

Bellevue Fire Training Site

Academy: June 13-16, 2011

Bellevue Fire Training Site 8 a.m.- 5 p.m.

Graduation: June 16, 2011 - 6 p.m.

Bellevue Fire Training Site



“Committed To Excellence”

The mission of the Bellevue Police Teen Academy is to provide young adults with a realistic view of a career in law enforcement. The experience begins with this application process and, if accepted, continues with participation in the week long Teen Academy. If you have any questions about or need any assistance with the academy or the application process please contact:

Bellevue Police Community Policing Coordinator, Jayme Krueger at:
(402) 293-3071 or 637-5852

Applicant's Name _____
Last, First, Middle

Due By: Thursday, May 13, 2011

Please turn the entire packet back in when completed

Who can participate and what are the requirements?

- Any student currently in a Bellevue High School age 15-18.
- Participant must have a minimum accumulative GPA of 2.0
- Participant must possess good moral character
- Participant must have an acceptable legal and driving history (If applicable)
- Participant must agree to **MANDATORY ATTENDANCE EVERY DAY** of the academy
- Participant and a Parent/Guardian **MUST ATTEND** an informational meeting prior to the academy. That meeting will be held at the **Bellevue Fire Training Site 3100 Cornhusker Rd. on Thursday, June 9th at 6p.m.**

Applicants are required to submit copies of the following:

- Driver's License, State or School I.D. with this application
- Copy of your most recent grade card that shows your accumulative GPA
- Letter of Recommendation from a School Administrator, Teacher, Guidance Counselor or Clergy

THIS QUESTIONNAIRE AND THE ABOVE DOCUMENTS MUST BE RETURNED TO THE Bellevue Police Department by Friday, May 13, 2011 AT THE FOLLOWING ADDRESS:

**Bellevue Police Department
Attn: Jayme Krueger
2207 Washington Street
Bellevue, NE 68005**

The Bellevue Police reserves the right to suspend or terminate the participation of any student who engages in unsafe, insubordinate, or illegal behavior at any time prior to or during the Teen Citizen's Police Academy.

INSTRUCTIONS:

1. Read and answer each question carefully, even if it is redundant. If the question does not pertain to you, write "NA" in the appropriate space.
2. All answers shall be printed clearly **in your own handwriting. DO NOT TYPE.**
3. Answer every question completely. If the space allotted for the question is insufficient, use the additional space provided at the end of the questionnaire. Be sure to include the number of the question and maintain the same question and answer format if supplemental answer space is used.
4. If under 18 years of age, Applicants and their Parent(s)/Guardian(s) are required to sign the *Release and Hold Harmless Agreement* and the *Permission to Conduct a Background Investigation*.
5. If 18 years of age or older, Applicants are required to sign the *Release And Hold Harmless Agreement and the Permission to Conduct a Background Investigation*
6. Applicants are required to thoroughly complete the *Emergency Contact Information*.

Bellevue Police Department Teen Citizen's Police Academy

Rules and Regulations

- You must conduct yourself in a responsible, professional manner at all times.
- You may not participate in any type of illegal activity. If it is determined you have participated in illegal activity, you will be removed from the academy during or prior to.
- You are NOT permitted to use tobacco products while at the academy.
- While at the police department you may come into contact with privileged information. You must keep all of this information confidential.
- No weapons are permitted at the academy.
- Your academy identification card will be worn on a lanyard around your neck.
- Cell phones must be turned off while at the academy.

APPLICANT INFORMATION

1. Last Name _____ First Name _____ Middle _____
2. Current Address No. _____ Street _____ Apt _____
City _____ County _____ State _____ Zip _____
Home Phone _____ / Cell Phone _____
Family email address _____
3. Current Vehicle Operator License or ID No. _____
State _____ / Expiration Date _____
4. Social Security Number _____
5. Date of Birth: Month _____ Day _____ Year _____
6. Adult Men's T- Shirt Circle one – S M L XL XXL
7. List how you will get to and from the Teen Citizen's Police Academy, if you plan to drive please list your vehicle information (Make, Model, Color, License Plate): _____

8. List any school related extra-curricular activities you are involved in (e.g. band, sports. etc.) _____

9. List any non-related school activities you are involved in (e.g. church, scouts, sports etc.) _____

10. Are you considering a career in Law Enforcement ? Yes or No
Explain, in your own words, why you have applied for the Teen Citizen's Police Academy at the Bellevue Police Department:

EDUCATION HISTORY

11. List the High School you currently attend:

School _____ Location _____
From: Month/Year _____ To: Month/ Year _____
G.P.A. _____ Grade Entering in 10/11 _____
School References (Teachers, Counselors, etc...include Phone numbers)

12. List below any other Middle Schools/High Schools you attended:

School _____ Location _____
From: Month/Year _____ To: Month/ Year _____
G.P.A. _____
School References (Teachers, Counselors, etc.) _____

School _____ Location _____
From: Month/Year _____ To: Month/ Year _____
G.P.A. _____
School References (Teachers, Counselors, Etc.) _____

13. List below any honors or awards you have received:

14. Were you ever expelled or suspended from **any** Elementary, Middle School, or High School

No Yes _____

If yes, specify when, where, and reason:

15. List all school-related disciplinary action, including academic probation, that has occurred.

EMPLOYMENT HISTORY

16. In chronological order, list your employment history. Begin with your present employer and continue listing **all** places previously employed.

Present Employer _____ Telephone No. _____
Immediate Supervisor _____
Telephone No. _____
Address No. _____ Street _____
City _____ County _____ State _____ Zip _____
From Month/Day/Year _____ To Month/Day/Year _____
Position _____ Hours _____
Duties and Responsibilities _____

Reason For Leaving _____

Previous Employer _____ Telephone No. _____
Immediate Supervisor _____
Telephone No. _____
Address No. _____ Street _____
City _____ County _____ State _____ Zip _____
From Month/Day/Year _____ To Month/Day/Year _____
Position _____ Hours _____
Duties and Responsibilities _____

Reason For Leaving _____

Previous Employer _____ Telephone No. _____
Immediate Supervisor _____
Telephone No. _____
Address No. _____ Street _____
City _____ County _____ State _____ Zip _____
From Month/Day/Year _____ To Month/Day/Year _____
Position _____ Hours _____
Duties and Responsibilities _____

Reason For Leaving _____

**RELEASE AND HOLD HARMLESS AGREEMENT
(Complete if under 18)**

I, the undersigned, hereby acknowledge that I am the parent or legal guardian for the minor child (Last) _____ (First) _____ (Middle) _____ . In consideration for my minor child participating in the Bellevue Teen Citizen's Police Academy, the undersigned hereby agrees that I will assume any and all risks resulting from the attendance and participation of my child at such functions and activities of the Youth Police Academy program. I further release the City of Bellevue and the Bellevue Police Department from any and all liability resulting from my minor child's attendance and participation. I further agree to indemnify and hold harmless the City of Bellevue, its agents, employees, officers, directors and volunteers from any and all claims, demands, expenses and liability, whether for personal injury, death or property damage arising out of the participation of my minor child in a Teen Citizen's Police Academy function or activity. I further consent and authorize the City of Bellevue to make use of my minor child's name, pictures, photographs and other likeness of the child in newspapers, advertisements or on the Bellevue Police Department web site, Facebook, Twitter or Blog to further promote its program. Furthermore, in the event of an emergency, the Officers/Volunteers in charge of the Teen Citizen's Police Academy have my permission to obtain medical treatment for my son/daughter at the nearest hospital or doctor, at my expense, if I cannot be reached.

Print Name (Last) _____ (First) _____ (Middle) _____

Signature of Applicant _____

Parents Signature _____

Date _____

****TO BE SIGNED AND NOTARIZED AT ORIENTATION****

PERMISSION TO CONDUCT A BACKGROUND INVESTIGATION

(Complete if under 18)

As an applicant for the Bellevue Teen Citizen's Police Academy, I hereby authorize the Bellevue Police Department to conduct a criminal history background investigation, including convictions, pending charges, and outstanding warrants. I understand that this criminal history check is being conducted due to the nature of the classes given at the Teen Citizen's Police Academy. I understand that all available police and criminal records will be checked and that the information will be used solely in determining eligibility of applicants for the Teen Citizen's Police Academy.

Print Name (Last) _____ (First) _____ (Middle) _____

Signature of Applicant _____

Parents Signature _____

Date _____

RELEASE AND HOLD HARMLESS AGREEMENT
(Complete if 18 or older)

I, the undersigned, hereby acknowledge that I am over 18 years of age. In consideration for me participating in the Bellevue Teen Citizen's Police Academy, I hereby agree that I will assume any and all risks resulting from my attendance and participation at such functions and activities of the Youth Police Academy program. I further release the City of Bellevue and the Bellevue Police Department from any and all liability resulting from my attendance and participation. I further agree to indemnify and hold harmless the City of Bellevue, its agents, employees, officers, directors and volunteers from any and all claims, demands, expenses and liability, whether for personal injury, death or property damage arising out of my participation in a Teen Citizen's Police Academy function or activity. I further consent and authorize the City of Bellevue to make use of my name, pictures, photographs and other likeness in newspapers, advertisements or on the Bellevue Police web site, Facebook, Twitter or Blog to further promote its program.

Print Name (Last) _____ **(First)** _____ **(Middle)** _____

Signature of Applicant _____

Parents Signature _____

Date _____

**** To be signed and notarized at Orientation****

PERMISSION TO CONDUCT A BACKGROUND INVESTIGATION

(Complete if 18 or older)

As an applicant for the Bellevue Teen Citizen's Police Academy, I hereby authorize the Bellevue Police to conduct a criminal history background investigation, including convictions, pending charges, and outstanding warrants. I understand that this criminal history check is being conducted due to the nature of the classes given at the Teen Citizen's Police Academy. I understand that all available police and criminal records will be checked and that the information will be used solely in determining eligibility of applicants for the Teen Citizen's Police Academy.

Print Name (Last) _____ (First) _____ (Middle) _____

Signature of Applicant _____

Date _____

EMERGENCY CONTACT INFORMATION

Primary Contacts

Parent/Guardian Name _____
Address _____
City _____ State _____ Zip _____
Phone Number _____
Cell Phone/Pager _____
Parent/Guardian Name _____
Address _____
City _____ State _____ Zip _____
Phone Number _____
Cell Phone _____ Work _____

The following designated individuals may act on behalf of the Parent/Guardian in case of emergency where the Parent/Guardian cannot be reached. This information must be filled out before your child can participate in the Teen Citizen’s Police Academy.
Thank You for your cooperation.

Alternate Contact 1

Name _____ Relationship: _____
Address _____
City _____ State _____ Zip _____
Phone Number _____
Cell Phone/Pager _____

Alternate Contact 2

Name _____ Relationship: _____
Address _____
City _____ State _____ Zip _____
Phone Number _____
Cell Phone/Pager _____

Our family physician is _____
Address _____ Phone _____
Medical Coverage Company _____
Exp. Date _____ Policy Number _____
Telephone number that I can be reached at _____
Alternate number that I can be reached at _____

Signature of Parent/ Guardian _____ Date _____
Name _____
Address _____ City _____ Zip _____

