

James City County Police Department Citizens Police Academy

“Together We Can Make A Difference!”

Registration Information

Instructions: Please fill out the application and registration forms and return the last two pages to the Director of the Citizens Police Academy at the Law Enforcement Center, or by email to john.leclaire@jamescitycountyva.gov at your earliest convenience.

If you have any questions or concerns, please contact the Director, Sgt. John LeClaire at (757) 259-5174.

An Overview of the James City County Police Department Citizens Police Academy

Introduction: Welcome to the James City County Police Department's Citizens Police Academy. The concept of a Citizens Police Academy originated in England in 1977. The first Citizens Academy in the United States was conducted in Orlando, Florida in 1985. The current James City County Police Citizens Academy was established on March 6, 1995 by former Chief of Police David A. Daigneault. This program is designed to provide a better understanding between citizens and police through education and communication. We want this experience to be rewarding for you therefore take part in discussions and feel free to ask questions.

Purpose: During your Academy experience, you will be given the opportunity to participate in several practical exercises such as: building searches, ride-along program, crime scene techniques, firing range and a tour of the Emergency Operations Center. Further instruction will be given by Police Instructors on various topics within the field of police work. Upon graduation you will also be given the opportunity to become a member of the Citizens Police Academy Alumni Association.

Recruitment: Citizens are recruited through a variety of mediums such as the local newspapers, the local county government T.V. channel, community newsletters, and referrals from the Citizens' Police Academy Alumni. Participants are required to either be a James City County resident or be employed in James City County. Criminal history checks are completed on each applicant before being accepted into the program.

For more information, please contact the James City County Police Department Community Services Unit, Sgt. John LeClaire at (757) 259-5174.

James City County Police Department

Citizens Police Academy

Instructional Requirements and Responsibilities

1. Citizens Police Academy participants shall not interfere with routine operations of the Police Department.
2. During the Ride Along participants are to follow the instructions of the Police Officer and not interfere with the performance of their duties.
3. Participants shall not be armed at anytime during the academy, except at the firing range with a weapon provided by James City County Police and under the supervision of a Firearms Instructor.
4. Participants who are asked to identify themselves by a Police Officer while at the Law Enforcement Center shall explain they are attending the Citizens Police Academy.
5. Smoking is not allowed in the Law Enforcement Center. Smoking is allowed outside and cigarette receptacles are located by each entrance.
6. A criminal records check will be conducted on all participants prior to the Academy start date.

In consideration of the James City County Police Department granting permission to enter in or upon any premises or vehicles which are under its actual care or constructive or passive control, I hereby waive all claims to damage or loss to my person or property which may be caused by an act, or failure to act, of the James City County Police Department, its officers, agents, or employees. I assume the risk of all dangerous conditions in, upon, or about the premises or vehicles and waive any and all notice of existence of such conditions.

I certify that I understand the requirements and responsibilities of participants in this program.

Applicant Signature

Date

James City County
Citizens Police Academy
Applicant Information

Names: _____
Last, First, M.I.

Address: _____

Phone #: _____

Date of Birth: _____

Email Address: _____

I would like my name to appear on the graduation certificate as follows:

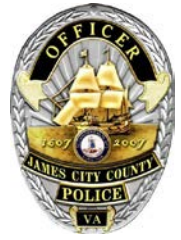
Office Use only:

Date Application Received:	Background Results:	Date Notified:	Enrolled in Academy: Y/N
----------------------------	---------------------	----------------	--------------------------



James City County Police Department

Authorization for Criminal History Record Check



LAST NAME	FIRST NAME	MIDDLE NAME	MAIDEN NAME
PLACE OF BIRTH	DATE OF BIRTH		

I certify that the information provided above is true and correct. I hereby give consent and authorize the James City County Police Department to search their files, the Virginia Criminal Information Network, the Central Criminal Records Exchange, and the National Crime Information Center for any information relating to my criminal history record. I understand that this information will be used, in part, to determine my eligibility for employment, for a volunteer position, or for participation in the Citizen's Police Academy. Unauthorized or further dissemination will subject the disseminator to criminal and civil penalties.

Signature of Applicant