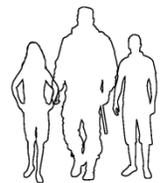


WANTED: CADETS

Must possess courage, tenacity,
fortitude, integrity & valor.*



*Must get along with members of SWAT, FBI Special Agents, Sheriffs,
Highway Patrol Officers, Federal Marshals, & Chiefs of Police.



JUNIORPOLICEACADEMY.ORG

Real Heroes



Fayetteville Police Department Junior Police Academy 2019



Fayetteville Police to Host 17th Annual Junior Police Academy

The Fayetteville Police Department's 17th Annual Junior Police Academy (JPA) is now accepting applications. The JPA starts on Monday, June 3, 2019 and runs through Saturday, June 8th. The academy will run each day from 8AM to 3PM.

Cadets gain hands-on knowledge about police work every day by participating in activities such as vehicle stops, crime scene processing, physical fitness, defensive tactics, confidence enhancing challenges and team building skills. All activities are taught by veteran police officers.

Current 6th, 7th, and 8th graders with a minimum "C" average are eligible to become Cadets. Applications are available at the Fayetteville Police Department, Bennett's Mill Middle School, and on the Police Department's Facebook and web pages. Applications must be turned in by May 24, 2019 to the Fayetteville Police Department. If you have any questions, please contact the C.A.R.E. Unit at (770) 719-4295.



Fayetteville Police Department Junior Police Academy 2019



Dear Applicant:

Thank you for your interest in the Junior Police Academy. For over 16 years, the program has been reaching out to young people, inspiring good citizenship through criminal justice education. Because the program demands the very best from its participants, students must meet the following qualifications:

1. Student must be at the middle school level with a minimum "C" grade point average.
2. Not more than two unexcused absence for the semester.
3. J.P.A. applicants must not have been arrested or referred to juvenile probation for any felony crime, or have any arrest for crimes of moral turpitude.
4. Print all information on application to the best of your knowledge. Applicant must sign along with parent's signature.
5. A one-page essay about yourself and why you want to participate in the program.
6. Complete release of liability form, signed by student and parent.
7. A complete background check will be conducted on each applicant.

*****Selection will be determined upon content of essay, out-come of background, and middle school record.*****

If you are up to the standards set by the program, we encourage you to fill out the attached application/liability release form in full and return it to the Fayetteville Police Department or Officer Gibson.

If you are selected, you will receive complete information regarding the academy, including an itinerary and list of things to bring, as well as the code of conduct for the academy.

If you or your parent/guardian has any questions, please contact me or Officer Gibson. Good luck and thank you for considering this wonderful opportunity!

Sincerely,



Eddie Hernandez

C.A.R.E. Officer
Fayetteville Police Department
760 Jimmie Mayfield Boulevard
Fayetteville, Georgia 30215
Phone: (770)-719-4295
CARE@fayetteville-ga.gov



Fayetteville Police Department Junior Police Academy 2019



APPLICATION

This application and related documents must be filled out completely by a parent and prospective cadet. The filing of this paperwork with the school and police department does not guarantee acceptance into the JPA program. The student listed in the following application will be referred to in this application as Cadet Candidate and if accepted a Cadet of the Junior Police Academy. All questions will be answered truthfully; any falsification may be grounds for dismissal from program.

Cadet's Last Name: _____

Middle Name: _____

First Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ - _____ Gender: _____ Shirt Size (Adult): _____

Cadet's Date of Birth: ____/____/____ Cadet's 2019/2020 Grade Level: _____

Name of Cadet's School: _____

Cadet's Homeroom Teacher: _____

Cadet's Teacher References #1: _____

#2: _____

Cadet's Legal Guardian's Name: _____

Has the listed Cadet ever been convicted of a crime: Yes or No (If yes, list crimes:)

Does the Cadet have a 2.0 grade point average or higher: Yes or No

Has the Cadet been expelled, suspended or had more than 3 office referrals during the last 12 months:

Yes or No (If yes explain) _____

Cadet Candidate Signature

Date

Parent Signature/Legal Guardian

Date

The signing of this application and related paperwork attests that you, as legal guardian of Cadet, and the Cadet Candidate agree to adhere to all guidelines, requirements, rules of conduct and release the Fayetteville Police Department, and all of its agents free from liability.

**Cadet Candidates will not be excluded due to Race, Gender, National Origin or Religion.



Fayetteville Police Department Junior Police Academy 2019



MEDICAL RELEASE

A written report of a physical examination performed by a qualified physician within the preceding 12 months must accompany the application. Applicant shall also have current protection against diphtheria, tetanus, poliomyelitis, measles and rubella, or a statement from a physician that immunization is in progress.

Name of Applicant: _____

Physical condition of Applicant: () Satisfactory () Unsatisfactory

The following signature is required indicating that the Applicant is capable of strenuous physical exercise.

Physician: _____

Address: _____

List below any unusual physical condition the Academy Coordinator should know about:

I understand that first aid will be available at the academy; that the students will be closely supervised and that hospital care will be given at the expense of the parent/guardian. I further understand that in case of serious injury or illness, I will be notified. If it is impossible to reach me in a timely manner, I hereby give my permission for emergency treatment or surgery as recommended by the attending physician.

Signature of Parent/Guardian: _____



Fayetteville Police Department Junior Police Academy 2019



LIABILITY WAIVER

I, the undersigned, (Parent's Name) _____ residing at (Address) _____, County of _____, State of Georgia, being the parent or legal guardian of (Participant's name) _____, hereinafter referred to as "Cadet", do hereby give my permission for him/her to attend the Junior Police Academy and in consideration of allowing him/her to participate in the above mentioned program voluntarily and knowingly release and discharge the Junior Police Academy, City of Fayetteville, the Fayetteville Police Department's employees, agents, successors, assigns and all others who may be liable from all claims, present and future, known or unknown, in any manner arising out of his/her participation in the Junior Police Academy.

I also acknowledge that the "Cadet" has no limiting medical conditions and is fully capable of participating in the program.

I appoint the Fayetteville Police Department to act in my place, in the event that the "Cadet" should require medical attention while involved in the Junior Police Academy program. This appointment is for the purpose of securing benefits for the health and welfare of the "Cadet" and expressly includes the authority to sign releases to physicians who may render emergency medical care and services. I promise to assume liability for payment of all such professional services, and to reimburse the City of Fayetteville for any expense that may be incurred for treatment, care, drugs, and other services for the "Cadet".

In consideration of all above as well as the supervision provided on my behalf and on behalf of the "Cadet", I hereby agree to hold the Fayetteville Police Department, City of Fayetteville's employees, agents, successors, assigns, its agents and all others who may be liable, harmless for results of any decision it may make in connection with the care and treatment of the "Cadet".

I agree that if the above mentioned participant's behavior is such that it endangers the welfare of the entire group, the Fayetteville Police Department has my permission to send him/her home.

_____ Signature of Parent or Guardian	_____ Date
_____ Address	_____ Home Telephone
_____ City, State, Zip	_____ Work Telephone

Notary: _____
Subscribed and sworn to before me this _____ day of 20____.



Fayetteville Police Department Junior Police Academy 2019



Simunition Firearms Release

Participation in the Fayetteville Police Department Junior Police Academy indicates an acknowledgement and receipt of the below Simunition Release Statement. Simunitions is an interactive firearm practice that involves a simulated firearm that discharges simulated gunpowder rounds. This round is a center fire cartridge that when fired, discharges a paint marking projectile. The students will only be firing at a paper target. The student will never engage live people but only stationary paper targets under the direction and supervision of a POST Certified Law Enforcement Officer. The purposes of this instruction will include gun safety and gun awareness.

Participation in this event, grants permission as described below, unless indicated in written notification that permission is not granted, by the student's parent or guardian. Written notification for non-participation must be given with the application.

I acknowledge that _____ may attend the Fayetteville Police Department Junior Police Academy Simunition Training in order to increase the awareness about Police Work and Duties and its programs. I grant permission for my child to be instructed in handgun safety, handgun awareness and proper discharging technique of firearms.

Student Name (print)

Parent / Guardian Name (signature)