

2017 Recruit Class



Denville Junior Police Academy

Monday July 10 through Friday July 14, 2017

Morris Knolls High School
50 Knoll Drive, Denville, NJ

8:00 a.m. to 4:00 p.m.

Fee: \$40.00 (to be collected on July 10, 2017)

(Check or Money Order made out to: Denville Junior Police Academy)

Applicants must be Denville residents in the 5th, 6th, 7th or 8th grade.

Application packets will be available at the Denville Police Department beginning May 1, 2017 at 9:00 a.m. The application packets may also be downloaded from the Department's website at that time.

(www.denvillepolice.org)

Applicants will be accepted on a first come first served basis. Deadline for returning the completed packet will be June 2, 2017 at 4:00 pm. and class size will be limited to 75 recruits.

Any questions regarding the Junior Police Academy may be directed to:
Lt. Frank Perna at 973-627-4900 ext. 311, Sgt. Jeff Tucker ext. 334 or
Det. Dennis Subrizi ext. 365



JUNIOR POLICE ACADEMY

Denville Police Department
(973) 627-4900



The Denville Police Department will be holding the annual Junior Police Academy from July 10, 2017 through July 14, 2017. This year's Academy will be held at Morris Knolls High School, located at 50 Knoll Drive in Denville.

Enrollment for the Academy will be restricted to 75 recruits. All applicants must be Denville residents who are in the 5th, 6th, 7th or 8th grade. Applications will be accepted on a first come, first served basis. The first 75 applications received will determine who is accepted to this year's recruit class. Any applications received after the first 75 will be placed on a waiting list. If any of the first 75 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.

Applications will be available beginning May 1, 2017 at 9:00 a.m. The application may be picked up at Denville Police Headquarters or downloaded from the Department's website (www.denvillepolice.org). **All returned applications and attached waivers/releases should be filled out completely. Medical waiver/release forms can be submitted with application or on the first day of Junior Police Academy (July 10, 2017).** Any application returned that is not filled out completely or as instructed may be subject to disqualification. *No applications will be accepted before Friday, May 1, 2017 or after Friday, June 2, 2017 at 4:00 p.m.*

Our objective is a week of education and fun through a Police Academy format. The week long curriculum will include various presentations from guest law enforcement agencies, hands on practices and physical training to give the students an idea of what is involved in becoming a Police Officer. Some of the agencies participating in this year's program include the Morris County Sheriff's Department, the Federal Bureau of Investigation, the Drug Enforcement Agency, ICE, Denville Animal Control, Denville Fire Department, and North STAR and Air 1 helicopters. There will also be a class trip which will consist of tours of the Morris County Police and Firefighters Academy and the Morris County Juvenile Detention Center. The Academy will culminate in a graduation ceremony at 1:00 p.m. on Friday. Each recruit's family is invited to attend the ceremony.

The daily schedule is from 8:00 a.m. to 4:00 p.m. Recruits are to be dropped off at Morris Knolls High School no later than 7:50 a.m. on each day. 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.

Each recruit is required to have his or her own lunch for the first 4 days. Please label all lunch containers with the recruit's name. Gatorade will be provided to all recruits during physical training exercises and other physical activities. On Friday, July 14th, the Academy will provide a free lunch to all recruits.

In order to offset the costs of the Academy, there will be a \$40.00 fee for each recruit. This fee will be collected on Monday, July 10th from each recruit. Please ***do not send cash*** and all checks or money orders should be made out to: Denville Junior Police Academy.

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!

If you should have any questions regarding this program, please call Lt. Frank Perna at 973-627-4900 ext. 311, Sgt. Jeff Tucker at ext. 334 or Det. Dennis Subrizi ext. 365.

Sincerely,

Lt. Frank Perna
Sgt. Jeff Tucker
Det. Dennis Subrizi



DENVILLE POLICE DEPARTMENT JUNIOR POLICE ACADEMY



INSTRUCTIONS

- This year's recruit class is limited to 75 children. The first 75 completed applications that are turned in at police headquarters will be accepted to this year's program. All other applicants will be placed onto a waiting list should any accepted recruits decide not to participate.
- All pages of the application must be filled out completely and truthfully. This includes the Application, Medical Waiver/Release and the Authorization and Release forms. Any application that contains false information or is not filled out completely will be disqualified.
- Please note that the Medical Waiver/Release requires the signature of your child's physician. If your child's physician does not sign this form, the application will not be accepted.
- In order to give all applicants an equal opportunity to complete the application packet and have their physician sign the Medical Waiver/Release, ***no applications will be accepted before Monday, May 1, 2017 at 9:00 a.m.***
- All completed applications must be returned to the Denville Police Department in person, ***no later than Friday, June 2, 2017 at 4:00 p.m.***
- When selecting the uniform sizes for your child, please select the appropriate size that fits your child and not the size that they would like to wear. The uniform shirt should not be baggy and the shorts should not have to be folded in to fit.
- All children who are accepted into the program will be notified by telephone and provided further instructions regarding the academy and uniform pick-up.
- If you have any questions regarding the Junior Police Academy or the application packet, please call Lt. Frank Perna at 973-627-4900 ext. 311, Sgt. Jeff Tucker ext. 351 or Det. Dennis Subrizi ext. 365.



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APPLICATION

Please fill out the following requested information completely. Also, please print all answers clearly. Any false, incomplete or illegible information may exclude the applicant from participating in this program.

Student's Name: _____
(Last Name) (First Name)

Address: _____

Telephone Number: _____ Sex: (M or F) _____ Age _____

Height _____ Weight _____

Tee Shirt Size: S M L XL (Adult Sizes Only) Shorts Size: S M L XL (Adult Sizes Only)

(Please circle the appropriate size - not the size you like to wear!)

Parent/Guardian Name: _____

Parent/Guardian Telephone Number: _____
(Home) (Work or Cell)

EMAIL (Used for contact): _____

Emergency Contact Name: _____
(Last Name) (First Name)

Emergency Contact Numbers: _____
(Home) (Work or Cell)

Relationship to Child: _____

Briefly describe your reason for wanting to participate in the Junior Police Academy program:



DENVILLE POLICE DEPARTMENT
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Authorization and Release

The undersigned parent/guardian, understanding all activities and requirements, requests the opportunity and privilege to have my child participate in the Denville Police Department's Junior Police Academy.

The undersigned agrees to have their child obey any and all directives or orders of any member of the Denville 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.

I 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.

The undersigned certifies that their son/daughter is between the ages of eleven and fourteen and is a resident of Denville 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.

Parent/Guardian Name: _____

Signature

Date

The undersigned also understands that the Junior Police Academy generates interest from the news media, both print and televised, and authorizes the release of my child's name and image for use in any news media story relating to the Junior Police Academy. I also authorize the release of my child's name and image for use in any and all presentations or other media to be used for or by the Denville Township Police Department regarding this program.

Parent/Guardian Name: _____

Signature

Date

As a reminder, this year's recruit class will be limited to the first 75 returned applications. Any applications that are not filled out completely or contain any false information may be disqualified.

All applicants accepted into this year's program will be notified by telephone and provided further information as to when and where to pick up their uniforms.



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Medical Waiver/Release

Please fill out the following requested information completely. Also, please print all answers clearly. Any false, incomplete or illegible information may exclude the applicant from participating in this program.

Does your child suffer from any medical conditions: _____ If yes, please explain.

Does your child suffer from seasonal or other 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 Denville 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 Denville, the Denville Police Department and all of its officers, the Morris County School of Technology, 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 responsibility of my family's own medical insurance company.

Parent/Guardian Name: _____

(Parent/Guardian Signature) (Date)

Please have your child's physician complete the following section.

Physician's Name: _____

Physician's Telephone Number: _____

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 Denville Junior Police Academy.

(Physician Signature) (Date)

Morris County Sheriff's Office

43 John Street • Morris Township, New Jersey 07960 • Phone 973-631-5174 • Fax 973-993-9653

James M. Gannon
Sheriff



MORRIS COUNTY CORRECTIONAL FACILITY RELEASE FORM

I RELEASE the Morris County Correctional Facility and the agents, officers and the employees of the Morris County Sheriff's Office Bureau of Corrections and the County of Morris from and against any and all claims, damages, liabilities, costs and expenses which I may have at any time, including but not limited to, for invasion of privacy, defamation, personal injury or death, property damage or destruction, or any other cause of action arising out of my visit to said facility on _____.

Print Name of Adult Attendee

Signature of Adult Attendee

AND/OR

I REPRESENT that I am the custodial parent or legal guardian of the named minor attendee. I CONSENT to the terms of this Release Form.

Name of Minor Attendee

Signature of Parent or Legal Guardian

Print Name of Parent or Legal Guardian

Date