



Citizens Police Academy Application

First Name Middle Initial Last Name

Street Name City/State Zip Code

Home Phone Number Work Phone Number

Driver License Number State Date of Birth

Current Employer Email Shirt Size: S ____ M ____ L ____ XL ____ XX ____

Have you ever been convicted of a felony?

Yes ____ No ____

Have you ever been arrested for any misdemeanor, including DWI, within the last 3 years?

Yes ____ No ____

Is it okay to contact you for additional information?

Yes ____ No ____

I hereby grant permission to the Sedalia Police Department representatives, to take and use: photographs, videos, and or digital images of me for use in news releases and or educational materials. These materials might include printed or electronic publications, Web sites or other electronic communications. I further agree that my name and identity may be revealed in descriptive text or commentary in connection with the image(s). I authorize the use of these images without compensation to me. All negatives, prints, digital reproductions shall be the property of the Sedalia Police Department.

Signature

Date

I understand, in consideration of the Sedalia Police Department, processing my application, I hereby irrevocably consent to the following:

1. I understand that a thorough and complete background investigation will be conducted for attendance of the CPA.
2. I understand that a background investigation is conducted by gathering and recording information about my past conduct and association from any and all sources that the Agency, in its sole discretion, may deem appropriate, including: criminal or other Governmental files and records, past and present employers, and any other source of information available.
3. I hereby release from liability and agree to hold harmless; under any and all possible causes of legal action, including negligence, the City of Sedalia, the Sedalia Police Department (the Agency) and any of its officers, agents or employees for any negligent or wrongful statements, acts, omissions made or recorded in the course of my background investigation.
4. I hereby release from liability and agree to hold harmless under any possible cause of legal action, including negligence, any person or entity which furnishes information or opinions to the Agency as a part of my background investigations.
5. I authorize any person or entity contacted by the Agency during the course of my background investigation to furnish any information or opinions such person or entity may have regarding myself, my conduct or associations, regardless of any statutory or other privilege I may have.
6. I understand the need for confidentiality of sources and information in my background investigation, and I expressly agree that I will never attempt to obtain access to any part of any part of the background investigation designated as confidential by the Agency. This release applies to any cause of action of any nature that might accrue to me.

Background Waiver Acknowledgement

I fully understand that any intentional attempt on my part to provide INCORRECT or MISLEADING information would be just cause for rejection of my application.

Signature

Date



I _____, having been duly advised of the facts and circumstances of participation in the Sedalia, Missouri Police Department's ***Citizen Police Academy*** (the "Police Activities"), including, but not limited to, activities specifically recited below, do understand and acknowledge (1) that Police Activities, including, but not limited to, the use of firearms and/or concussive devices, are inherently dangerous, even when properly executed; (2) that the study and application of Police Activities, including, but not limited to, use of firearms, riot & crowd control techniques and/or subject control procedures, are known to be risky activities with unexpected consequences; (3) that Police Activities are physically demanding, requiring that I be in good physical condition and free of any disability or physical condition that would make my participation unsafe. In light thereof, I do freely assume any and all risks, including, but not limited to, risks arising from using and employing firearms, concussive devices or other equipment I may encounter while participating under the supervision of the City, its departments, agents, employees and assigns. I will not undertake, and will immediately advise the City of, any activity for which I am not physically qualified or able to safely complete.

I do further hereby release, indemnify, hold harmless and forever discharge the City of Sedalia, its employees, agents, successors and assigns, of and from any and all manner of action or actions, claims, suits, damages, judgments and demands, of any kind whatsoever, whether now or in the future, at law or in equity, including such actions brought by, and/or on my behalf or through me by my heir(s), successor, agent, representative, assigns, or others, that results or may have resulted from my participation in Police Activities with the City, including, but not limited to, use of firearms, riot & crowd control techniques and/or subject control procedures (including my use and the use by others involving me), and any training or instruction in the same.

I further acknowledge that I have read and understood the foregoing RELEASE OF LIABILITY AND ASSUMPTION OF RISK and freely, as a condition of my participation, enter into this agreement with full knowledge of its binding legal effect on me and my heir(s), successor, agent, representative, assigns, or others.

IN WITNESS WHEREOF, the undersigned does hereby execute this document on this ____ day of _____, ____.

Date: _____ Signature: _____

CARDINAL RULES OF FIREARMS SAFETY

1. Treat all firearms as though they are loaded.
2. Keep your finger outside the trigger guard until you are on target and ready to fire.
3. Point the muzzle in a safe direction at all times.
4. Be sure of your target and what is beyond.

I understand and will exercise the above range safety rules and obey any commands of the City's Police or other officers and employees during my participation.

Signature: _____