



Colorado Springs Police Department



Citizens' Academy Application for Admissions



Application Advisory

A background investigation will be conducted on all individuals applying to attend the CSPD Citizens' Academy. The CSPD reserves the right to deny the attendance based on adverse criminal history information or for any other reason.

Application Procedure

Application:

Please complete the application, to include a notarized liability waiver which must be signed in the presence of a Notary Public, and return it to Officer J. Kuhn, 705 S. Nevada Ave, Colorado Springs, CO 80903 by August 22, 2019. The waiver can be notarized free of charge at any of the Colorado Spring Police Department police stations. Seating is limited and applications will be processed in the order they are received.

Attendance:

The Citizens' Academy is an 11 week program in which students will attend a class every Thursday night from 6pm-9pm at various police facilities. The class is scheduled to begin September 5, 2019 and end November 14, 2019. While the class is free of charge to the citizen a substantial time commitment is required. Citizens are expected to attend all of the sessions.

Acceptance:

Once your application has been processed; if accepted, you will receive a confirmation email. It is important that you respond to the **email** confirming your attendance to reserve your slot.

Instructions:

1. All information must be answered completely and accurately. Falsification or failure to include information as directed will be considered grounds for disqualification.
2. This application should be printed or typed legibly, notarized and submitted no later than 8/22/19 to:

Officer J. Kuhn
Colorado Springs Police Department
705 S. Nevada Ave.
Colorado Springs, CO 80903

Colorado Springs Police Department
Citizens' Academy Application

Date of Application ____ / ____ / ____

Name: _____ Date of birth: ____ / ____ / ____ Age: ____
(Last) (First) (Middle)

Address _____
(Number) (Street) (City) (State) (Zip)

Home Phone () - Cell () - E-mail _____

SSN _____ - _____ - _____

Please state how you found out about the program _____

EMPLOYMENT INFORMATION

Employer _____ Phone Number () -
(List business name and current supervisor)

Address _____
(Number) (Street) (City) (State) (Zip)



CSPD CITIZENS' ACADEMY
BACKGROUND INFORMATION
PERSONAL INFORMATION

Name of Applicant _____

Do you possess a valid Driver's License? Yes No (if yes, the following must be completed.)

State _____ Number _____ Type _____ Expiration Date _____

Have you ever been convicted of a crime or accepted a plea bargain or had charges dropped? Yes No If yes, please complete the following (list juvenile as well as adult records). List any additional information on the back or separate sheet.

Month/Year: _____

Month/Year: _____

Charge: _____

Charge: _____

Location: _____

Location: _____

Disposition:

Disposition:

Background Check Release

I, (your name) _____, Date of Birth _____/_____/_____ do hereby authorize the Colorado Springs Police Department designee to have access to any records your agency may have concerning me.

Date: _____

(Signature)

Colorado Springs Police Department



Citizens' Academy

Academy Participation Liability Waiver and Indemnification Agreement



Name of Participant: _____
(Last) (First) (Middle)

Date of Birth: ____/____/____

Statement of

Applicant: _____, DO HEREBY AUTHORIZE government entities, military entities, law enforcement agencies, City, County, and Federal entities, private persons, and employers, to furnish and release any and all available information relating for the purpose of determining my suitability for the CSPD Citizens' Academy.

I DO HEREBY RELEASE from liability all persons or entities disclosing information pursuant to this release.

It is hereby agreed that I am a party to this Participation Liability Waiver and Indemnification Agreement and that said Agreement is binding upon me, any and all of my legal heirs, successors of whatever kind, executors and administrators. I do hereby for myself, my child, my heirs, executors and administrators remise, release, and forever discharge the Colorado Springs Police Department, the City of Colorado Springs, and any of their directors, officers, agents, employees, or volunteers from any and all claims, liabilities, action, demands or accuses of action on account of death or on account of any injury to myself arising out of the participation in the CSPD Citizens' Academy.

I further agree to fully indemnify, defend, and hold harmless the City of Colorado Springs, the Colorado Springs Police Department, and any and all of their deputies, police officers, agents, employees, or volunteers from and against any and all loss, damage, injuries, claims, cause or causes of action, or any liability resulting from, arising out of, or in connection with my negligence at any time during the program.

In case of sudden illness or other serious medical emergency, I authorize a member of the Colorado Springs Police Department to take appropriate action in seeking medical attention.

I hereby grant the Colorado Springs Police Department permission to record my likeness and/or voice for the use by television, film, radio, or printed media to further the aims the Colorado Springs Police Department in related publications, campaigns, and in other ways it sees fit.

I hereby certify to the best of my knowledge and belief, that I am free of all contagious disease and I am of sound health.

In case of accident, injury, or illness occurring while I am engaged in any Citizens' Academy, I hereby grant permission to treat and/or seek treatment as required.

Emergency Contact Name: _____

Emergency Contact Telephone: (____) _____ - _____

Hospital Preference: _____

Primary Care Physician: _____

I acknowledge that I have read this Participation Liability Waiver and Indemnification Agreement and understand the terms set forth. I warrant that I am legally competent to execute this document.

(Signature of Citizen)

(Date)

(Signature of Notary Public)

(Date)

My Commission Expires: _____