

# Citizen's Police Academy

### 2022 Class Schedule

9/13	Intro/ Pre-Test @ Municipal Building BOE room	6 PM
9/20	Motor Vehicle Investigations / K-9 @ Band Shell	6 PM
9/27	Motor Vehicle Stops @ Koehler	6 PM
10/4	DWI/DRE demonstration @ Band Shell	6 PM
10/11	Shoot/Don't Shoot Scenarios @ HPD Range	6 PM
10/15	Firearms @ HPD Range	10 AM
10/18	Active Shooter Simunitions @ Municipal Building	6 PM
10/25	Defense Tactics @ HIMA	07:30 PM
10/29	Patrol Response Scenarios @ Fire Training Center	10 AM



### Citizen's Police Academy Application

#### Dear Applicant:

Thank you for your interest in the Citizen's Police Academy. It is our desire to reach out to our borough residents and inspire good citizenship and practices through criminal justice education. Because the program demands the very best from its participants, our students must meet the following qualifications.

- 1. Applicants must be 18 years or older
- 2. Applicants must be a resident, employed in or associated with the Borough of Hawthorne
- 3. Applicants must sign the "Hold Harmless" agreement
- 4. Applicants will be subject to a background investigation
- 5. Applicants must provide a photograph of a NJ Driver's License or Identification with completed application via e-mail prior to the first class.
- 6. Applicants are required to attend a majority of the classes

This application must be completed and signed by the appropriate person(s), and returned via email to Detective Joseph DiGeronimo at 6255@hawthornepdnj.org no later than September 1st, 2022.

Our anticipated start date will be <u>September 13th</u> at 6pm at the Hawthorne Board of Education Conference Room. Weather permitting, some classes with be conducted outdoors.

If you have any questions, please contact Det. DiGeronimo at Police Headquarters at 973-423-8300 or by email at 6255@hawthornepdnj.org.

# APPLICATION FOR ENTRANCE TO CITIZEN'S POLICE ACADEMY:

NAME	DATE OF BIRTH	
ADDRESS		
PHONE NUMBER		
E-MAIL ADDRESS		



## **Hold Harmless Agreement**

I, the undersigned	, residing at
Participants Name (Pr	rint)
Address	·
voluntarily and knowingly release and discharge the C Department, and all instructors and participants in this all claims, present and future, known or unknown, in a Citizen's Police Academy program.	program as well as all other(s) who may be liable from
I also acknowledge that I.	has no limiting medical conditions
	has no limiting medical conditions e (Print)
and am capable of participating in the program.	
	Signature
This hold harmless agreement is a testament to my une  EMERGENCY IN	
Please provide emergency <b>Name</b> , <b>Address</b> , <b>Phone Nu</b> to get in contact with you immediately. Please provide	umber and E-Mail Address below in the event we need at least two contacts. Print or Type Clearly.