

BENICIA POLICE DEPARTMENT

YOUTH CITIZEN POLICE ACADEMY

JULY 18 TO JULY 22, 2016



TIMES:
8:00 AM
To
2:00 PM



LOCATION:
MATTHEW TURNER
ELEMENTARY



TOPICS COVERED

- ALCOHOL AND DUI / VISION GOGGLES
- ARREST PROCEDURES
- CRIMINAL LAW
- GUN SAFETY (DISCUSSION ONLY)
- CRIME SCENES / COLLECTING EVIDENCE
- DANGEROUS DRUGS
- EQUIPMENT DEMOS
- ETHICS / CHARACTER / INTEGRITY
- WHAT WOULD YOU DO SCENARIOS
- INTERNET SAFETY/SOCIAL MEDIA / CYBER BULLYING
- PEER SUPPORT
- OPERATE POLICE RADAR GUN
- SCENARIO INVESTIGATION
- SCENARIO CRIME SCENE

AVAILABLE TO STUDENTS ENTERING 7TH AND 8TH GRADES
CLASS LIMITED TO 30 STUDENTS

WHO ARE CITY OF BENICIA RESIDENTS OR
ATTEND A SCHOOL LOCATED IN THE CITY OF BENICIA

FOR MORE INFORMATION
VISIT WWW.CI.BENICIA.CA.US

CLICK ON THE YOUTH CITIZEN POLICE ACADEMY
OR CALL (707) 746-4244
SGT. KENNY HART



**BENICIA POLICE DEPARTMENT
APPLICATION FOR
YOUTH CITIZEN'S POLICE ACADEMY**



The academy is designed for all Benicia 7th and 8th graders, to learn more about how the police department conducts business. Classes will be held Monday through Friday from 8 am to 2 pm. Police officers and staff will give a series of presentations that provide information on all aspects of policing (from Traffic to Crime Scene processing). Students will participate in practical scenarios, including the processing of a mock crime scene. The K-9 Unit, Motorcycles, and SWAT Officers will perform demonstrations during the course of instruction. Students are given demonstrations and supervised operation of a taser and simunitions weapon (similar to a paint ball) at a range site (No Live Firearms will be handled by the students). Each day will be a new and interesting experience that is filled with professional presentations.

Can everyone attend?

Every Benicia student citizen, entering into either 7th or 8th grade that has a minimum 2.0 G.P.A., is offered the opportunity to attend. Due to the nature of the course study and the safety of students and staff, all applicants must pass a background screening from the information provided on this application. Applications are accepted on first come, first serve basis. Class is limited in size.

When and where is the training?

The Benicia Youth Citizen Police Academy Class #3 will begin on Monday July 18th at 8:00 am and conclude with the final class and graduation ceremonies on Friday July 22nd at 2:00 pm at Matthew Turner Elementary School.

How much does it cost?

There is no cost to participants!

What is supplied?

Each student will receive all training materials (books & outlines), binder, lunch on Friday's scenario day, and a Youth Citizen's Police Academy shirt.

How do I sign up?

1. Complete ALL question blocks on the form on the reverse side of this flyer along with the attached waiver and notification forms.
2. Submit all forms by **5 pm on Monday June 27th** to:
(All forms are dated and the first 30 applications accepted will be enrolled. Don't delay)

Benicia Police Department
200 East L Street
Benicia, CA 94510
(707) 745-3412
Attn: Sgt. Kenny Hart
(707) 746-4244
Fax (707) 746-0131

**BENICIA POLICE DEPARTMENT
APPLICATION FOR
YOUTH CITIZEN'S POLICE ACADEMY**

Name (First, Middle, Last)	Date of Birth
Present Address (Must reside in Benicia)	Home Phone
Parent / Guardian	Cell Phone
Parent / Guardian	Cell Phone
School	Current G.P.A.
Email Address	Shirt (Adult) Size: S M L XL
Please provide a brief explanation of why you would like to attend this academy	
Signature of Student Applicant _____ Date _____	

Authorization and Participation Agreement

Has your child ever had any problem not listed elsewhere on these forms which you feel might hamper his/her efforts as a Youth Citizen's Police Academy participant, or that would bring embarrassment to the Benicia Police Department? (If YES, explain)

Any false statement(s), either verbal or written, may cause an applicant's name to be removed from the eligible list or be cause for immediate dismissal if any appointment was made.

By signing below I certify that the student does not have any medical conditions, which would preclude the above applicant from participating in this program.

Signature of Applicant's Parent / Guardian: _____ **Date:** _____

FOR POLICE USE ONLY

Date received	GPA Check	SRO Check	Records Check	CAD Check

Benicia Youth Citizen's Police Academy Emergency Form

Child's Name _____
Last First Middle

Child's Birth Date _____ Home Address _____
Street City

Parent 1/ Guardian Name _____ Phone _____

Agency Where Employed _____ Work# _____

Parent 2/ Guardian Name _____ Phone _____

Agency Where Employed _____ Work# _____

Person to notify (other than parents) in case of emergency:

1. _____ Relationship _____ Phone _____

2. _____ Relationship _____ Phone _____

Please list any persons (other than parents) you give permission to pick up your child:

1. 4. 7.

2. 5. 8.

3. 6. 9.

Family Physician _____ Phone _____

Medical Insurance Co. _____ Policy _____

Hospital to which child should be transported if necessary _____

Is your child currently on medication? YES NO If yes, what? _____

Is your child allergic to anything? YES NO If yes, what? _____

Other information we should know (fears, special needs, etc.)

MEDICAL AUTHORIZATION

In case of medical emergency, I understand that every effort will be made to contact parents or guardians. In the event that I cannot be reached, I hereby give the City permission to contact the following physician:

Physician Name _____ Physician Phone Number _____

If the above named physician is unavailable, I hereby authorize any adult employee or volunteer of the (Police Department) into whose care minor child has been entrusted, to consent to any emergency x-ray examination, anesthetic dental or surgical diagnosis or treatment or hospital care to be rendered to said minor by a licensed physician (M.D.), dentist (D.D.S.), or qualified emergency personnel.

Parent/ Guardian Signature _____

Date _____



Benicia Youth Citizen's Police Academy

Waiver

(7th - 8th Grade)

2016



Dear Parents / Guardians,

Welcome to the Benicia Youth Citizen's Police Academy! We look forward to making your child's participation in the program an enriching and enjoyable one. The State of California requires sponsors of recreation programs to inform parents of the nature and structure of the programs their children are participating in.

Childcare and recreation are differentiated by the states and definitions are included in a manual called "The California Care Licensing Manual." Programs that meet the definition of childcare must be licensed by requirements related to facility, staff and program structure. Recreation programs as defined by the State, are exempt from the licensing requirements but it is mandated that parents/guardians of children registered for recreation programs be notified of the following.

"Children participating in recreation programs are not there to receive structured care and supervision. Children have the right to come and go from the facility and staff will not physically restrain children to prevent them from leaving the facility when they desire."

The State also requires the sponsor of the program have a signed statement from each parent/guardian that they understand the conditions under which the facility operates and that it is not a licensed child care facility.

Please complete the following:

By signing below, I understand the conditions under which the Benicia Youth Citizen's Police Academy operates, and it is not a licensed childcare facility.

Participants Name: _____

Name of Parent / Guardian: _____

Signature of Parent / Guardian: _____ Date: _____

Waiver of Liability: I, the undersigned, in consideration of _____ participation in the program(s) listed above, agree to indemnify and hold harmless, and release, waive and discharge the City of Benicia, its elected or appointed officers, officials, employees, agents and volunteers from and against any and all liability for any injury or property damaged which may be suffered by the above named participant(s) arising out of, or in any way connected with participation in the program(s), including injuries due to the active or passive negligence of the City, its officials, employees, agents and volunteers. I understand that there is some physical activity involved in this program.

I HAVE READ THE ABOVE HOLD HARMLESS AND RELEASE AGREEMENT AND FULLY UNDERSTAND THAT I ASSUME ALL RISKS FOR ANY INJURIES AND PROPERTY DAMAGE SUFFERED BY MY CHILD/CHIDREN DURING THE COURSE OF THE YOUTH CITIZEN'S POLICE ACADEMY.

Signature of Parent / Guardian _____ Date _____

City of Benicia
Benicia Police Department Youth Citizen Academy

MEDICATION PERMISSION FORM

Benicia Police Department staff will only administer prescription medications from the original containers.

I GIVE MY PERMISSION FOR THE STAFF OF THE BENICIA POLICE DEPARTMENT YOUTH CITIZEN ACADEMY PROGRAM _____ **(initial)** TO ADMINISTER THE FOLLOWING MEDICATION TO:

Child's Name _____

Medicine _____

Amount/Dosage _____

Time(s) of Day _____

Beginning Date _____ Ending Date _____

Does medication need to be refrigerated? _____

Is it important to give the medication before or after a meal? _____

Prescribing Physician's Name _____ Phone _____

Possible side effects: _____

Special Instructions: _____

Parent/Guardian by signing this document warrants that the information provided above is accurate and expressly waives on behalf of himself/herself and the child any right to bring a lawsuit against the City of Benicia, its employees, officers, or agents, for damages arising out of the dispensing of prescription medication by City staff consistent with the information provided.

Parent/Guardian Signature

Date

Accepted by: _____ Date _____



Benicia Police Department
200 East L Street
Benicia, CA. 94510

Permission to Use Photograph

Event: Benicia Police Youth Citizen Academy

Location: Matthew Turner Elementary School & the Benicia Police Department

Student Name _____

I grant to the City of Benicia and its Police Department, the right to take photographs of my child in connection with the above-identified event. I authorize the City and the Police Department, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

I agree that the City and the Police Department may use such photographs of my child with or without their name and for any lawful purpose, including for example such purposes as publicity, illustration, and Web content (i.e. newsletters, Benicia Police Facebook site, etc.).

I have read and understand the above:

Signature _____

Printed name _____

Address _____

Date _____

Signature, parent or guardian _____
(if under age 18)