



**KENNEDALE
POLICE DEPARTMENT
CITIZEN POLICE ACADEMY**



Academy Application

Begins September 13, 2021

Ends: November 8, 2021

Graduation Ceremony: November 9, 2021



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Program Overview

In 2021 the Kennedale Police department founded the KPD Citizen Police Academy. The curriculum and teaching methods are similar to the traditional police academy, but these students are not police candidates. The class members include a wide cross section of the community's population, i.e., homemakers, professional business persons, retirees, and neighborhood watch members.

The first Police Night School was held in England in 1977 by the Devon and Cornwall Constabulary and met with immediate success. Citizens were anxious to learn of the operations of their police force, which were usually obscure and private. Shortly afterward, the Orlando Police Department (Florida) conducted the first Citizen Police Academy in the United States. The Orlando Academy was patterned after the English Police Night School and since that time, other law enforcement agencies throughout the United States have developed and conducted similar versions of the Citizens Police Academy.

Graduates of the Kennedale Police Citizens Academy WILL NOT be commissioned law enforcement officers or vigilantes. They will simply be more familiar with the operations of the Kennedale Police Department and will gain a deeper understanding of the problems and policies their officers face daily.

The 20-hour training program consists of classroom and hands on instruction to provide the public with a working knowledge of the Kennedale Police Department. Participants will meet for (2.5) hours once a week during a 8-week course. Instructions will be comprehensive, and each week a different area of the police department will be covered. Each session is facilitated by Kennedale Police Officers or Police Employees who are state certified instructors, or experts in a particular field. Topics covered typically include:

- 1. Orientation**
- 2. Traffic laws, seven step violator contract**
- 3. Crime Prevention**
- 4. Firearms Safety**
- 5. DWI investigation**
- 6. Criminal investigations**
- 7. Use of Force**
- 8. Family Violence**
- 9. Penal Code**
- 10. Patrol Procedures**
- 11. Police equipment**
- 12. Records and Evidence**



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It is the goal of the Kennedale Police Department that after you complete the 8-week program; you will have enough information to dispel any suspicions or misconceptions about the law enforcement role in our criminal justice system.

GENERAL INFORMATION:

NAME: _____

LAST NAME

FIRST NAME

MI

ADDRESS: _____ **CITY:** _____ **ZIP:** _____

HOME PHONE #: _____

WORK PHONE #: _____

DOB: ____ / ____ / ____ **DRIVER LICENSE #:** _____ **STATE:** _____

EMPLOYER: _____

OCCUPATION _____

DATE OF EMPLOYMENT: _____ **YRS. SERVICE** _____

EMAIL: _____

ACADEMIC INFORMATION:

HOW MANY YEARS OF FORMAL EDUCATION HAVE YOU COMPLETED?

(CHECK APPROPRIATE BOX)

- | | | |
|--|--|--|
| <input type="checkbox"/> HIGH SCHOOL | <input type="checkbox"/> GED | <input type="checkbox"/> OTHER |
| <input type="checkbox"/> 1 YR COLLEGE | <input type="checkbox"/> 2 YRS COLLEGE | <input type="checkbox"/> 3 YRS COLLEGE |
| <input type="checkbox"/> 4 YRS COLLEGE | <input type="checkbox"/> MASTER DEGREE | <input type="checkbox"/> POST GRADUATE |

LIST SCHOOLS, DATES ATTENDED AND DEGREES OBTAINED. (INCLUDE COLLEGE, BUSINESS, OR TRADE SCHOOLS, AND OTHER SPECIALIZED TRAINING).

SCHOOL: _____ DATES
ATTENDED _____ DEGREE _____

SCHOOL: _____ DATES
ATTENDED _____ DEGREE _____

SCHOOL: _____ DATES
ATTENDED _____ DEGREE _____

LIST PROFESSIONAL OR FRATERNAL MEMBERSHIPS:

ARREST OR CONVICTION RECORD:

IF YOU HAVE BEEN ARRESTED OR CONVICTED FOR ANY OFFENSE, PLEASE GIVE EXPLANATION.

PERSONAL:

MAY WE CONTACT YOUR PRESENT EMPLOYER? YES _____ NO _____

LIST THREE PERSONS AS A REFERENCE NOT RELATED TO YOU.

NAME _____ ADDRESS _____

TELEPHONE #: _____ PROFESSION _____

NAME _____ ADDRESS _____

TELEPHONE #: _____ PROFESSION _____

NAME _____ ADDRESS _____

TELEPHONE #: _____ PROFESSION _____

DURING THIS ACADEMY YOU WILL BE ASKED TO PARTICIPATE IN DIFFERENT SCENARIOS IN A CONTROLLED ENVIRONMENT. IF THERE ARE ANY REASONS YOU CAN NOT PARTICIPATE, PLEASE INDICATE BELOW OR AT THE TIME OF THE TRAINING.

WHAT IS YOUR OBJECTIVE IN ENROLLING IN THE CITIZEN'S POLICE ACADEMY?

HAVE YOU EVER BEEN ACTIVE IN ANY GROUP OR ORGANIZATION WHICH WAS RELATED TO LAW ENFORCEMENT? (IF YES, WHO, WHERE AND WHEN AND IN WHAT ROLE)

HAVE YOU EVER HAD A NEGATIVE EXPERIENCE WHICH WAS RELATED TO LAW ENFORCEMENT? (IF YES, PLEASE EXPLAIN)

CERTIFICATION:

CHECK EACH STATEMENT BELOW AFTER YOU HAVE READ IT. YOU, AS AN APPLICANT TO ATTEND THE CITIZENS POLICE ACADEMY, AGREE TO THE FOLLOWING REQUIREMENTS

MAINTAIN A SATISFACTORY ATTENDANCE OF AT LEAST SEVEN (5) CLASSES.

YOUR ATTITUDE AND CONDUCT WILL BE AT A HIGH LEVEL WHILE ATTENDING THE ACADEMY.

I AUTHORIZE THE CHIEF OF POLICE OR HIS REPRESENTATIVE TO CONDUCT A

BACKGROUND INVESTIGATION TO SUPPORT THE FACTS THAT I AM A GOOD CITIZEN OF THIS COMMUNITY.

ALLOW THE CHIEF OF POLICE OR HIS REPRESENTATIVE TO RELEASE MY NAME TO OTHER.

ALL THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

PRINTED NAME

SIGNATURE

DATE



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HOLD-HARMLESS AND RELEASE FORM

I _____ the undersigned, a participant of the Kennedale Police Department Citizens Police Academy and/or the Volunteers In Police Service Program (VIPS), hereby indemnifies and holds harmless the City of Kennedale Texas Police Department, its agencies and employees, specifically including, any and all police officers or personnel involved with the supervision and control of the Citizens Police Academy and /or Volunteers in Police Service Program, from any claims of any kind whatsoever or of any nature for injury to the person or damage to the property of _____,

This indemnity and hold-harmless agreement shall be considered a complete and total waiver of any and all liability on the part of the City of Kennedale Texas Police Department, its servants, agents, or employees, and particularly the police officers engaged in the supervision and control as set forth herein above.

APPLICANT'S SIGNATURE: _____

DATE: _____ TIME: _____

PRINTED NAME: _____

Signed and Sworn before me this _____ day of _____, 20_____

NOTARY PUBLIC

My commission expires _____.

SEAL



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AUTHORIZATION TO RELEASE INFORMATION

I HEREBY REQUEST AND AUTHORIZE YOU TO FURNISH THE KENNEDALE POLICE DEPARTMENT WITH ANY AND ALL INFORMATION THEY MAY REQUEST CONCERNING MY WORK RECORD, CRIMINAL RECORD, AND GENERAL REPUTATION. THIS INFORMATION WILL BE USED FOR THE PURPOSE OF DETERMINING MY ELIGIBILITY FOR PARTICIPATION IN THE CITIZEN'S POLICE ACADEMY AND THE VOLUNTEERS IN POLICE SERVICE (VIPS) PROGRAM IF I CHOOSE TO APPLY.

I HEREBY RELEASE YOU AND YOUR ORGANIZATION FROM ANY LIABILITY WHICH MAY OR COULD RESULT FROM FURNISHING THE INFORMATION REQUESTED ABOVE OR FROM ANY SUBSEQUENT USE OF SUCH INFORMATION IN DETERMINING MY QUALIFICATIONS TO PARTICIPATE IN THE CITIZEN'S POLICE ACADEMY AND / OR VIPS PROGRAM.

APPLICANT'S SIGNATURE: _____

DATE: _____ TIME: _____

PRINTED NAME: _____

Signed and Sworn before me this _____ day of _____, 20_____

NOTARY PUBLIC

My commission expires _____

SEAL

