



Pleasanton Police Department

Citizens' Academy

Program Description

Starting in January, Citizens' Academy meets Thursday evenings from 6:30-9:30 p.m. for approximately 15 weeks. Participants will be notified of details prior to the start date.

This program includes a mix of lectures, demonstrations and some hands-on activities. The goals of the program are to create closer partnerships with the community, explain law enforcement procedures, and to discuss the importance of public involvement in the policing process. There is no cost to attend and the only commitment is your time.

The program is open to adults only. All applicants will be carefully screened via a modified background and phone interview. Participants must live and/or work in Pleasanton.

Please complete the attached application, waiver, and a copy of your state issued driver's license or I.D. card. If you do not have a state issued license or I.D. card, contact the program coordinator.

Applications can be dropped off at the front counter of the police department or mailed to 4833 Bernal Ave, PO Box 909, Pleasanton, CA 94566-0090. Please return your applications as soon as possible since space is limited.

Thank you for your interest. We look forward to receiving your applications.

If you have any other questions, please contact Sergeant Jason Knight at (925) 931-5221 or jknight@cityofpleasantonca.gov.

Citizens' Academy Application



CITIZEN INFORMATION			
Name:			
Address:			
Date of Birth:			
Driver's License #:			
Phone:		E-mail:	
QUESTIONNAIRE			
Briefly explain why you are interested in participating in the Citizens Academy:			
Are you interested in becoming a police department volunteer?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Have you previously participated in a ride along with the Pleasanton Police Department?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Have you been arrested for anything more than a minor traffic violation?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
If YES, briefly explain when, where, what happened, and the outcome. Prior arrests are not automatic disqualifiers. The individual circumstances will require review.			

I certify the above information is correct and I understand the Pleasanton Police Department may conduct a modified background check.

Signature of Participant

Date

Name of Participant (please print)



Pleasanton Police Department

Citizens' Academy: Release and Waiver

I UNDERSTAND THAT:

- Attendance and participation in the City of Pleasanton's Citizens' Police Academy is strictly a voluntary endeavor. This academy provides no marketable police officer skills and **DOES NOT** constitute a law enforcement training program. Under supervision, students will learn about and may be given the opportunity to operate firearms. They will also learn about other weapons, including chemical agents, impact weapons, and Taser stun guns. One of the exercises (FATS) involves firearms training using coherent light (laser) technology that could be hazardous to the eyes of both operator and bystander. All weapons, even when handled properly using all necessary safety precautions, are capable of causing serious bodily injury, including but not limited to hearing loss, eye loss or injury, or even death to the operator and/or bystanders.
- Participation in the academy can also include learning and practicing control holds, weaponless defense techniques and handcuffing with other attendees and instructors. Physical involvement in these exercises can cause temporary and permanent injuries, including but not limited to bruises, strains, sprains and bone fractures.

NOW, THEREFORE, I AGREE THAT:

- I AM AWARE THAT THE ACADEMY CAN INVOLVE HAZARDOUS ACTIVITIES, INCLUDING THE OPERATION OF FIREARMS AS WELL AS PHYSICAL MANIPULATION OF THE BODY WHILE PRACTICING CONTROL HOLDS, WEAPONLESS DEFENSE TECHNIQUES AND HANDCUFFING. THESE ACTIVITIES INVOLVE RISKS OF INJURY OR DEATH. I FREELY AGREE TO ASSUME AND ACCEPT ALL OF THESE RISKS.

Please initial here: _____

- I have discussed the physical requirements and risks of this academy with my physician or health care professional and he/she has told me I am in acceptable physical condition to participate, without limitations, in this program. **(Optional)**
- In consideration of being permitted to participate in the Academy, I HEREBY AGREE TO WAIVE, DISCHARGE AND RELEASE FROM ANY LEGAL LIABILITY AND AGREE NOT TO BRING ANY LEGAL ACTION AGAINST THE CITY OF PLEASANTON, and its officers, officials, employees, agents and volunteers for any and all injuries or death caused by or resulting from any participation in the Academy, whether or not caused by the negligence of the foregoing parties. I HAVE CAREFULLY READ AND UNDERSTAND THIS AGREEMENT, AND SIGN IT FREELY OF MY OWN ACCORD.

Signature of Participant

Date

Name of Participant (please print)



Pleasanton Police Department
Media Release Form

I, _____, hereby grant permission to the Pleasanton Police Department, its employees or representatives, to take and use any and all photographs/digital images, video/digital tape recordings, audio recordings, of me for use in promotional, educational, or other 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).

The indefinite use of these materials is authorized by me without compensation. All negatives, positives, prints, digital reproductions and video and audio recordings shall be the property of the Pleasanton Police Department.

Signature

Date

Street Address

City, State, Zip