

***The Lake Zurich Police Department invites you  
to participate in our***

# ***Citizens Police Academy***

The Citizens Police Academy will give residents of Lake Zurich an opportunity to see what policing is all about. This is an **11**-week program with classes held once a week on Tuesday nights. Each participant will commit to attending the 3-hour training session each week.

Some of the topics include:

- A tour of the police facility including the 911 Dispatch Center
- Vehicle crash investigations
- DUI/traffic enforcement
- Criminal investigations
- Crime-scene processing
- The duties of a patrol officer
- Drug interdiction and enforcement
- Police defensive tactics
- Firearms training
- Juvenile justice
- Ride along with a patrol officer

**The Academy is free and consists of both informative presentations and hands-on experiences. All applicants must be at least 21 years of age and will be subject to a criminal background check. In order to provide a worthwhile program seating is limited, minimum class size is 12 with a maximum of 20.**

The program runs from September 13<sup>th</sup> to November 22<sup>nd</sup>, 2016, 6:30 to 9:30 PM

**APPLICATIONS ARE DUE BY August 26<sup>th</sup>, 2016**

Applications are available online at [www.lakezurich.org/police](http://www.lakezurich.org/police) or at the Police Facility 200 Mohawk Trail, Lake Zurich, IL 60047

For more information contact Detective Kurt Danielson at (847) 719-1690 (ext. 6136).



Lake Zurich Police Department  
**Citizens Police Academy**  
**Application**

A Nationally Accredited Law Enforcement Agency



**PLEASE PRINT**

APPLICANT INFORMATION	Name		Last	First	Middle	Maiden or other name used	Date of Birth	
	Address:			Street	City	State	Zip Code	Drivers License Number
	Home Phone:		(      )	Cellular Phone:	(      )	Email address:		
	Business or Occupation:				Name of Business or Employer			
	Business or Employer Address:		Street	City	State	Zip Code		
	Have you ever been arrested		Nature of Offense (describe)					
	<input type="checkbox"/> Yes <input type="checkbox"/> No							
	Have you ever been Convicted		List any convictions					
	<input type="checkbox"/> Yes <input type="checkbox"/> No							
Please describe why you wish to participate in the Citizens Police Academy (Please attached a separate sheet for additional space)								
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I have Read the program description for the Lake Zurich Police Department Citizens Police Academy and I understand that if I am approved to participate in the program, ***I will not be authorized to carry firearms or exercise the powers of a peace officer.*** I authorize the Lake Zurich Police Department to conduct a criminal background check in conjunction with my application to participate in the Citizens Police Academy.

\_\_\_\_\_  
 Signature of Applicant

\_\_\_\_\_  
 Date

**In addition to this application you must attach a copy of your drivers' license, a signed Non-Disclosure Agreement and a signed Release of Liability.**

Return this application and attached documents to: Lake Zurich Police Department, Crime Prevention Officer, 200 Mohawk Trail, Lake Zurich, IL 60047

**FOR OFFICE USE ONLY**

DOCUMENTS	Copy of Drivers License Received		Waiver of Liability Received	Non-Disclosure Agreement Received	
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Name of Official Receiving Documents		Date Received			
APPROVAL	Approved	Crime Prevention Officer Signature		Date	Reason for Denial
	<input type="checkbox"/> Yes <input type="checkbox"/> No				
	Approved	Sergeant of CID Signature		Date	Reason for Denial
<input type="checkbox"/> Yes <input type="checkbox"/> No	Chief's Signature		Date	Reason for Denial	
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Lake Zurich Police Department  
**Citizens Police Academy**  
**Non-Disclosure**

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In consideration of the benefits that I will receive from my participation in the Lake Zurich Police Department's Citizens Police Academy, I do hereby agree to the following:

I **WILL NOT** discuss any of the following information with any unauthorized individuals:

1. Law Enforcement Agencies Data System (LEADS) information
2. Illinois Secretary of State information
3. Criminal history information
4. Any juvenile information
5. Any information of a sensitive nature related to ongoing investigations
6. Any criminal intelligence information

The Lake Zurich Police Department will take every precaution to avoid exposing the participants of the Citizens Police Academy to the above information.

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Please Print your Full Name

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Signature of Applicant

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Date



**Lake Zurich Police Department  
Citizens Police Academy  
Release of Liability**

A Nationally Accredited Law Enforcement Agency



In consideration of the benefits that I will receive from my participation in the Lake Zurich Police Department's Citizens Police Academy, I do hereby release the Village of Lake Zurich, its personnel, agents, public officials, servants and employees from any and all liability, claims, demands, actions and causes of actions which may hereafter have on account of any and all injuries and damage to me or my property, or my death, arising out of or related to any happening or occurrence while I am participating in the Citizens Police Academy. For the same consideration, I agree to forever hold the Village of Lake Zurich and said persons aforementioned harmless from any such liability, claims, demands, actions or causes of action.

The terms hereof shall be in full force and effect during the period of my participation in the Lake Zurich Police Department Citizens Police Academy.

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Please Print your Full Name

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Signature of Applicant

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Date