

Coppell Police Department
Coppell Police Department



**JUNIOR POLICE
ACADEMY-COPPELL
APPLICATION**

CAMP DATES

Place 1, 2, or 3 next to preferred date of attendance.
X out the date you CANNOT attend.

- **Advanced JPAC (August 8-12, 2016), 8:30 am to 3:30 pm
- Beginners JPAC Session 1 (June 20-July 1, 2016), 8:30am - 12:30pm
- Beginners JPAC Session 2 (July 5-15, 2016), 8:30am - 12:30pm

**To be eligible for the Advanced JPAC session, your child must have completed 7th grade, AND have attended a prior JPAC session. The Advanced JPAC is a one week course that meets all day (8:30-3:30 pm). They will need to bring a sack lunch and drinks/snacks with them daily. This is intended for a more mature student, who will not have any discipline issues. The officers will have complete discretion as to who attends this class. Class size is limited.

Please submit the ORIGINAL application to Officer Rachael Freeman at CMSN, Coppell PD, or your child's SRO at their respective campus.

COPPELL POLICE DEPARTMENT

JUNIOR POLICE ACADEMY SUMMER CAMP PROGRAM

The Coppell Police Department is affording young people of our community the opportunity to experience law enforcement first hand. The Coppell Police Department Junior Police Academy is keeping the same format as last year. We have decided to break the sessions up into an Advanced and Beginners session. The Beginners session is intended for a student who has not participated in JPAC prior to this year. Students will learn the basic functions of a working police department as well as have a chance to explore the idea of a possible career in this ever challenging and demanding field. Students will attend regular classes with topics including, but not limited to, Texas law, patrol procedures, traffic enforcement, rappelling, crime scene investigation, and many other exciting topics. Students will have the opportunity to practice what they learn in practical exercises. This session is a TWO WEEK class, and meets from 8:30 am – 12:30 pm.

The Advanced session is intended for a more mature student, preferably in 7th or 8th grade, and who has already graduated from a previous JPAC session. Topics will be more mature, hands on, and progressive. This session will be one week long, and will be Monday thru Friday 8:30 am – 3:30 pm. Students will have several breaks throughout the day as needed, and will need to bring an appropriate sack lunch. Please limit your child's sugar intake.

This application will include a background check, medical and parental release forms. **The academy will consist of students who reside in the City of Coppell, or who attend a school in Coppell ISD. Students must have completed 6th, 7th, or 8th grade.** Students will be expected to take the program seriously, and follow academy rules, which closely resemble school rules. **Due to the seriousness of the content of this program, immature behavior will not be tolerated.** Applications and all applicable paperwork are attached to this letter. Students will be chosen in the order that all paperwork is received and upon successful completion of the background check. Class sizes are limited per session and are on a first come first serve basis. Academy classes will be held at **Coppell Police Department**, located at 130 Town Center Blvd., Coppell, TX 75019. Any change in meeting location will be communicated to a parent's email address.

There is **no cost** to attend this academy, and participants will receive a t-shirt. The last day of each session will end in a pizza party and graduation ceremony. No lunch will be needed on that date.

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RULES OF BEHAVIOR

- Students will be expected to maintain a mature and respectful attitude towards classmates and instructors.
- Students will adhere to a strict “no touch” policy, much like those of school rules.
- Students are expected to keep up with their personal belongings and should limit what they bring to class (lunches, water bottles, etc.)
- Cell phones will be allowed, however use during instructional time will be limited. Cell phones may be collected at the beginning of class.
- Students will be expected to participate in all class activities (unless student is unable. Instructors should be given notice of student’s physical limitations prior to the start of the academy).
- Students are expected to wear comfortable, yet appropriate clothing. No tank tops, loose athletic shorts, sandals, or flip flops are permitted, as exercise/physical activity may be required.

The academy is designed to closely resemble that of a real police academy. Although we realize children differ from adults in many ways, rules of behavior are strict, to ensure the safety of all participants. We wish for the academy to be a fun and enjoyable experience for all who attend.

Violations of the rules of behavior may result in removal from the class for the day. Subsequent violations may result in expulsion from the academy.

STUDENT SIGNATURE _____ **DATE** _____

PARENT/GUARDIAN _____ **DATE** _____

ACADEMY COORDINATOR _____ **DATE** _____

COPPELL POLICE DEPARTMENT
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APPLICATION

DATE _____

NAME (LAST, FIRST) _____ AGE _____ M / F

ADDRESS _____ HOME
PHONE _____

SCHOOL _____ CURRENT GRADE (15-16) _____

HOBBIES/INTERESTS _____

T-SHIRT SIZE- YM YL YXL AS AM AL AXL

PARENT/GUARDIAN _____

ADDRESS _____ HOME
PHONE _____

EMPLOYER _____ PHONE _____

CELL PHONE _____ PAGER _____

EMAIL ADDRESS _____

EMERGENCY CONTACT _____

ADDRESS _____ PHONE _____

PHYSICIAN _____ PHONE _____

DENTIST _____ PHONE _____

**COPPELL POLICE DEPARTMENT
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PARENTAL RELEASE

I, _____, give permission for _____
(Name of Parent) (Name of minor)
to participate in the Coppel Police Department's Junior Police Academy Summer
Camp Program being held on _____ (please list date).

I understand that my child will be attending classes supervised by Coppel Police
Department Personnel. I also understand that the supervised classes will consist of both
Educational and practical material and that some of the material in the classes may be
graphic due to the nature of the curriculum or class topic. I have read the rules of conduct
and dress code and understand that both must be adhered to at all times. The undersigned
does also hereby authorize photographs and or video documentation to be taken of my
son / daughter. Photographs and or videos may be used to promote or further the Coppel
Police Department's Junior Police Academy Summer Camp Program, and my be
used in the media or other social networking applications.

(Parent / Guardian signature)

(Date)

(Parent / Guardian address)

(Place of Employment/address/phone)

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MEDICAL INFORMATION

***PLEASE PRINT**

DATE: _____

NAME OF APPLICANT: _____

PLEASE LIST ANY MEDICAL CONDITIONS THE APPLICANT HAS:

LIST ALL MEDICATIONS TAKEN BY APPLICANT:

**IS APPLICANT REQUIRED TO TAKE MEDICATION DURING THE HOURS OF
CAMP YES / NO**

IF YES, WHAT IS THE MEDICATION/DOSAGE?

IS APPLICANT ABLE TO ADMINISTER MEDICATION? YES / NO

IF NO EXPLAIN _____

**DOES YOUR STUDENT RECEIVE SPECIAL EDUCATION OR 504 SERVICES
FROM CISD (OR ANY OTHER EDUCATIONAL FACILITY? YES/NO**

IF YES, PLEASE LIST: _____

**NOTE: All medical emergencies will be treated as such and will be attended to by the
Coppell Fire Department as deemed necessary by academy personnel, instructors, or
coordinators.**

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RELEASE OF LIABILITY WAIVER

I, _____, hereby authorize my son/daughter to participate in the Coppell Police Department's Junior Police Academy Summer Camp Program. The camp will take place on _____ (list date).

I, _____, also give my permission for my son/daughter to be transported to and from scheduled and specified events by the following modes of transportation: 1) Vehicles rented, owned or operated by the City of Coppell, or 2) Privately owned vehicles.

I, _____, fully understand and my son/daughter fully understands that participation and transportation during the Coppell Police Department's Junior Police Academy Summer Camp Program could result in bodily injury, serious bodily injury, illness or death. Although I fully appreciate these risks, I desire my child to participate in the Coppell Police Department's Junior Police Summer Camp Program without regard of the consequences. I, the undersigned, assume full and complete responsibility for any accident, injury or illness and or activity that may occur to my child as a result of their participation. I agree to and hereby release, hold harmless, and waive all claims that I, or my child may have against the Coppell Police/Fire Department, City of Coppell, Coppell I.S.D., or any of its employees, agents, sponsors, representatives, or volunteers from all legal injury, illness or death and or activities arising from or connected in any manner to my child's participation in the Coppell Police Department's Junior Police Academy Summer Camp Program, including but not limited to liability, damages, legal fees and or costs caused by or related to the negligence or the intentional act of the Coppell Police Department, City of Coppell, Coppell I.S.D., or anyone of its employees, agents, sponsors, representatives, or volunteers in whole or in part. This release shall be binding on my heirs, legatees, administrators, and assigns.

(Parent/guardian signature)

(Date)

(Student's full name – PLEASE PRINT)

(Student's school)