



# JUNIOR POLICE ACADEMY

## 2022 Hamilton Township Junior Police Academy Application

### Overview

The Junior Police Academy will be held June 27<sup>th</sup> – July 1, 2022 from 8am until 12pm each day. There is no fee to attend the program, but priority will be given to Hamilton Township residents. **This program is best suited for children between 5th and 7th grade for the upcoming school year.** If your child is selected to participate, he or she should dress appropriately for the weather. Clothing should also be comfortable for “hands on” activities and physical fitness. There will be a picnic and graduation on Friday at noon which parents and siblings of the cadets are invited to attend. Please indicate on the enrollment application how many people will be attending the picnic.

### Purpose

The mission of the Hamilton Township Junior Police Academy is to offer youths the opportunity to experience the methods and techniques often used in Law Enforcement. The academy will focus on key aspects of the Law Enforcement profession including respect, self-discipline, integrity, equality, education, and physical fitness. Daily exercises, scenarios, and training will help the cadets build an understanding of the Law Enforcement profession while focusing on problem solving and the role of the Police Officer as a public servant.

### Applicant:

NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HAMILTON TOWNSHIP RESIDENT:  YES  NO  FUTURE

T-SHIRT SIZE (PLEASE CIRCLE ONE): YOUTH OR ADULT - S M L XL XXL

Please explain why you wish to enroll in the Junior Police Academy:

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Please list any medical concerns that would prohibit you from participating in physical fitness activities and minor physical contact during any portion of this Junior Academy:

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Please list organizations with which you are/were involved and any awards or recognition you have received:

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**Parent/Guardian:**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME/WORK: \_\_\_\_\_ CELL: \_\_\_\_\_

EMAIL (Parent/Guardian): \_\_\_\_\_

EMPLOYER: \_\_\_\_\_

NUMBER ATTENDING PICNIC/GRADUATION (including Cadet): \_\_\_\_\_

ADDITIONAL AUTHORIZED PERSON FOR PICKUP:

NAME: \_\_\_\_\_ PHONE #: \_\_\_\_\_

**Please complete and return to the Hamilton Township Police Department by May 30<sup>th</sup> to Officer Hayslip:**  
[mhayslip@hamilton-township.org](mailto:mhayslip@hamilton-township.org)

**If you have any questions please contact Officer Molly Hayslip at 513-683-0538.**

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PARENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

The determination of medical restriction is your responsibility. Seek competent medical advice about any condition which may cause concern. Your signature releases Hamilton Township Police Department from liability.

## **PHOTO/VIDEO INFORMATION AND RELEASE**

The Hamilton Township Police Department would like permission to release photographs/video of your child that may be taken while they attend the Hamilton Township Junior Police Academy. These photographs/videos may be released in a variety of ways, which may include television networks, newspaper outlets, educational purposes, promotional items for future events, Hamilton Township social media accounts, or the Hamilton Township Police Department website ([www.hamilton-township.org](http://www.hamilton-township.org)).

Your permission is required for the release of these photos/videos and/or their name. Photographs may have captions describing the photograph and the academy. These captions may include your child's name with your signed permission. Please sign and return the form below. Check each box that applies.

I give permission for the release of the following:

- Photos:            YES            NO
  
- Videos:            YES            NO
  
- Child's name:    YES            NO

Name of Cadet (print): \_\_\_\_\_

Parent/Guardian name (print): \_\_\_\_\_

Parent/Guardian signature: \_\_\_\_\_

Date: \_\_\_\_\_