



*"Small Town Atmosphere  
Outstanding Quality of Life"*



## Citizen's Police Academy Application

Classes will be held every Wednesday, from 6:00 p.m. to 9:00 p.m. There will be two Saturday sessions from 7:00 a.m. to 4 p.m.

Name: \_\_\_\_\_ D.O.B.: \_\_\_\_\_  
(Last) (First) (MI) (mm/dd/year)

Driver License Number: \_\_\_\_\_ State: \_\_\_\_\_ Expiration: \_\_\_\_\_

Home Address: \_\_\_\_\_  
(Street)

\_\_\_\_\_ (City) (State) (ZIP Code)

Home Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_

Can you fulfill the commitment to attend all classes for the duration of the Citizen's Police Academy?

Yes:      No:      If no, please comment:

\_\_\_\_\_

What, if any, is the extent of your involvement in the community? (Clubs, social groups, etc)

\_\_\_\_\_

Is there a Law Enforcement topic you would especially like included in the Citizen's Academy?

\_\_\_\_\_

I, hereby, make application for the Citizen's Police Academy hosted by the Town of Danville Police Department.

510 LA GONDA WAY, DANVILLE, CALIFORNIA 94526

Administration  
(925) 314-3388

Building  
(925) 314-3330

Engineering & Planning  
(925) 314-3310

Transportation  
(925) 314-3310

Maintenance  
(925) 314-3450

Police  
(925) 314-3700

Parks and Recreation  
(925) 314-3400

I understand that a standard background check may be conducted using the information I have provided.

I understand that a prior criminal conviction may prohibit my participation in the Citizen's Police Academy.

I understand that all obtained information will be confidential.

All information provided is accurate to the best of my knowledge.

Signed: \_\_\_\_\_

Dated: \_\_\_\_\_

As a Citizen's Academy participant you will be offered the opportunity to participate in a variety of practical exercises to include: motor vehicle skills training, firearms training, scenario based use of force continuum training, tour of jail facilities, and other active events that involve walking, driving a vehicle on a closed course and manipulating firearms.

"Waiver of Liability: I, the undersigned or parent/legal guardian of the individual named above, do hereby waive, release, and discharge all claims for damages, death, personal injury, property damage which I may have or which may hereafter accrue to me as a result of participation in said activity. I understand that accidents can occur during the said activity. Knowing the risks of the said activity, I hereby agree to assume those risks. This release is intended to discharge and hold harmless the Town of Danville, its officers and employees from liability. This waiver and assumption of risk is to be binding on my heirs and assigns. I further understand that photographs and video may be taken of me during the course of the said activity and that these photographs and video may be used for Town of Danville publicity purposes. I HAVE READ AND UNDERSTAND THIS RELEASE."

Signed: \_\_\_\_\_

Dated: \_\_\_\_\_

**Completed applications must be returned to:**

Town of Danville Police Department  
Attn: Citizen's Police Academy  
510 La Gonda Way  
Danville, CA 94526