



# **CITY of LORAIN POLICE DEPARTMENT**

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## **CITIZEN POLICE ACADEMY**

### **What is the Citizen Police Academy?**

The Citizen Police Academy is a look into the values, philosophy, and operations of the Lorain Police Department. Designed for the residents of Lorain, the Academy educates citizens about the “how and whys” of the Department, and the citizen’s role in the Community-Oriented Policing philosophy. Students are expected to share this realistic view of the Department with other citizens to improve the efficiency of law enforcement and order maintenance in their neighborhoods through shared responsibilities and resources.

### **What topics are covered?**

A wide variety of topics are included in the Citizen Police Academy. Citizens examine training and related issues. The application of the Community-Oriented Policing philosophy will be discussed. The topics will address both parts of the Department—those that are seen by the public and those areas seldom seen.

### **What is the purpose?**

The purpose of the Lorain Citizen Police Academy is to provide information to the citizens who attend so they may make informed judgments about the Department and police activity. Understanding can dispel suspicions and misconceptions, and increase police/community rapport through this educational process. The Department, in turn, becomes more aware of the feelings and concerns of the community from the students. This will help to establish open lines of communication and cooperation in our shared goal of achieving the best police service for the citizens of Lorain.

### **When is the academy?**

The Citizen Police Academy meets on Thursday evenings for three (3) hours. The Academy runs for ten (10) weeks and is held at various Police Department buildings. Classes meet from 6:00 p.m. to 9:00 p.m., and require a substantial commitment from the student. Any student who misses more than two meetings will not be able to graduate. There is no cost to the students. Casual clothes are recommended.

### **Who can apply?**

Persons 21 years old and older, persons involved in community activities (area commissions, business commissions, block watches, owners of businesses within Lorain), Lorain residents, and of this group, those able to make a commitment to attend the ten-week course.



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### **Standards for Admission**

Applicants who would not be considered are:

- Persons who have applications pending with a law enforcement agency (it is not the intent of the Citizen Police Academy to further the career choices of the students).
- Direct relatives of current police officers living in the same household.
- Persons with a criminal history.
- Persons under 21 years of age.
- Persons living outside the Lorain city limits with no other ties to the city.

Applications must be received at least two weeks prior to the class start date. Once the applications are closed, the selections will be made by the academy staff with the Chief of Police making the final decisions.

Local records and a criminal history will be checked. Outstanding warrants and driving histories will be checked. Persons with a history of thefts, public intoxication, or repeated offenses will not be considered. Persons who are the subject of a protective order will not be considered. Persons with extensive driving records will be looked at to determine if their reasons for wanting to attend conform to the goals of the academy.

A waiting list will be created from the accepted applications that were not able to be included in this class due to class size. If an opening occurs prior to the beginning of the class, the next person on the waiting list will be contacted.

**PLEASE NOTE: IF ACCEPTED, APPLICANTS WILL NOT BE PERMITTED  
TO BRING CHILDREN OR WEAPONS TO CLASS.**



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### Application for Enrollment

Applicant must be 21 years of age to be eligible. Incomplete and/or unsigned applications will not be considered.

**PLEASE PRINT OR TYPE:**

NAME (LAST, FIRST, MIDDLE)		DATE:
HOME ADDRESS:		ZIP CODE:
HOME PHONE:	WORK PHONE:	
EMAIL ADDRESS:		
PRESENT EMPLOYER:		
EMPLOYER ADDRESS:		ZIP CODE:
OCCUPATION:	HIRE DATE:	
DRIVER'S LICENSE NO:	SOCIAL SECURITY NUMBER:	BIRTHDATE:
HAVE YOU EVER BEEN ARRESTED FOR, CONVICTED OF, OR CITED FOR AN OFFENSE OTHER THAN MINOR TRAFFIC CITATION(S) BUT INCLUDING DUI/OVI?		<input type="checkbox"/> NO <input type="checkbox"/> YES, EXPLAIN BELOW
IF YES, EXPLAIN IN DETAIL GIVING THE DATE, CHARGE, LOCATION AND ACTION DATE:		
BRIEFLY EXPLAIN WHY YOU WISH TO BE ENROLLED IN THE LORAIN CITIZEN POLICE ACADEMY:		
LIST ANY COMMUNITY ACTIVITIES IN WHICH YOU ARE CURRENTLY INVOLVED:		



# CITY of LORAIN POLICE DEPARTMENT

## CITIZEN POLICE ACADEMY

### Application for Enrollment

List two character references who are not family members or employers:

NAME:	
HOME ADDRESS:	ZIP CODE:
HOME PHONE:	WORK PHONE:

NAME:	
HOME ADDRESS:	ZIP CODE:
HOME PHONE:	WORK PHONE:

**PLEASE REVIEW YOUR ANSWERS CAREFULLY AND READ THE STATEMENT BELOW BEFORE SIGNING THIS APPLICATION.**

I hereby certify that there are no willful falsifications, omissions, or misrepresentations in the foregoing statements and answers to questions. I understand that any omission or false statement on this application shall be sufficient cause for rejection for enrollment or dismissal from the Lorain Citizen Police Academy.

I understand the information contained in this application is considered a public record and may be released to the media or others upon their request. I also understand that I may be photographed or videotaped by the news media or the Lorain Police Department during the course of this program. These pictures or videotapes will be used for news releases and informational promotions.

Some classes require walking and standing as different police facilities will be toured. Please inform us of any considerations or accommodations that you may need while touring these facilities.

SIGNATURE:	DATE:
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Return completed application by mail to:

LORAIN POLICE DEPARTMENT  
ATTENTION: CITIZEN POLICE ACADEMY COORDINATOR  
100 WEST ERIE AVENUE  
LORAIN, OH 44052  
or fax to: (440) 204-2519



# **CITY of LORAIN POLICE DEPARTMENT**

## **CITIZEN POLICE ACADEMY**

### **Participation Permit & Promise to Release**

PRINTED NAME OF PARTICIPANT:

In consideration of the benefits that I will receive from my participation in the Lorain Citizen Police Academy, I do hereby release the city of Lorain, its police officers, public officials, agents, servants, and employees from any and all liability, claims, demands, actions and causes of action which I may hereafter have on account of any and all injuries and damage to me or to my property, or my death, arising out of or related to any happening or occurrence while I am participating in the academy. For the same consideration, I agree to forever hold the City and said persons 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 Lorain Citizen Police Academy.

SIGNATURE OF PARTICIPANT:

DATE:

SIGNATURE OF WITNESS:

DATE:

You will be issued a Citizens Academy Polo shirt to wear during the Academy. These shirts sizes fit smaller than ordered. With this in mind, please circle your shirt size. Sizes available are:

- Small
- Large
- X-Large
- XX-Large
- XXX-Large
- XXXX-Large



# CITY of LORAIN POLICE DEPARTMENT

## CITIZEN POLICE ACADEMY

### Emergency Contact Information

PLEASE LIST ANY ALLERGIES OR OTHER PERTINENT MEDICAL INFORMATION THAT MAY BE NEEDED IN CASE OF ANY EMERGENCY;

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FAMILY DOCTOR'S NAME:	PHONE NUMBER:
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DOCTOR'S ADDRESS:
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HOSPITAL OF PREFERENCE:
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EMERGENCY CONTACT NAME:
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HOME ADDRESS:	ZIP CODE:
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HOME PHONE:	WORK PHONE:
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MOBILE PHONE:	OTHER PHONE:
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PARTICIPANT SIGNATURE:
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HOME ADDRESS:	ZIP CODE:
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HOME PHONE:	WORK PHONE:
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**Authorization for Release of Information**

I, \_\_\_\_\_, do hereby authorize a review of and full disclosure of all records concerning me to any authorized agent of the City of Lorain Police Department, whether the said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of any and all records concerning any criminal activity. This may include, but is not limited to, criminal histories, driving records, traffic accidents, arrest reports, offense reports or any official document.

I understand that any information obtained by a background investigation which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for attendance to the Citizen Police Academy. I certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information; and I hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

I authorize the release of my name and full disclosure of all records concerning me to verify past and future application with other law enforcement agencies.

A photocopy of this release form will be valid as an original thereof, even though said photocopy does not contain an original writing of my signature.

Return completed application by mail to:

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100 WEST ERIE AVENUE  
LORAIN, OH 44052  
or fax to: (440) 204-2519**

