

CITIZEN'S POLICE ACADEMY APPLICATION

GEORGE MASON UNIVERSITY
POLICE DEPARTMENT
4393 UNIVERSITY DRIVE
FAIRFAX, VA 22030
703-993-2810
www.gmu.edu/police



Eligibility

The Mason Police Citizen's Academy program provides members of the public the opportunity to observe and experience, first-hand, various functions of the police department. Applicants must be at least 18 years old, be in good health, and have no criminal record. All information furnished will be considered confidential.

Application Instructions

Send the completed application to recrdspd@gmu.edu at least 14 calendar days prior to the start of the program. An entry in all fields is required. Write "N/A" if a field does not apply to you. Once approved, you will be contacted to schedule an appointment for processing prior to beginning the program.

Applicant Information				
Last Name		First Name		Middle Name
Home Address — Street			Home Address — City	Home Address — State
Phone Number	Email Address	Date of Birth	Driver's (D/L) License #	D/L State
Emergency Contact Name		Emergency Contact Relationship		Emergency Contact Phone

Registration Requirements				
Which best describes you? (Check all that apply)				
<input type="checkbox"/> GMU Student/Faculty/Staff		<input type="checkbox"/> Interested Community Member		<input type="checkbox"/> Police Department Guest
Indicate your shirt size:	<input type="checkbox"/> X-Small <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> X-Large <input type="checkbox"/> 2X-Large <input type="checkbox"/> 3X-Large			
Why do you want to participate in this program? You may attach additional page(s) if needed.				
Have you previously participated in a police ride-along?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, specify agency:		
Have you previously been refused participation in this program?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, specify date:		
Are you currently involved in any traffic or criminal legal process as a defendant, plaintiff, or witness?				<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, explain:				

References (Required)			
Reference #1	Name	Phone	Email
Reference #2	Name	Phone	Email

Program Rules

General Conduct

1. Maintain professionalism at all times during citizen police academy activities.
2. Follow all instructions provided by department personnel.

Attendance & Participation

3. Arrive on time for all sessions and notify staff in advance if you will be absent. You must be able to commit to the full program, missing no more than two sessions to graduate.
4. Participate in classroom discussions and activities while respecting others' opinions.

CJIS Training Requirement

5. Complete Criminal Justice Information Systems (CJIS) training prior to your participation in the program by using the link that will be emailed to you. Bring your completion certificate with you to your appointment for program processing.

Dress Code

6. Wear a collared shirt, blouse or jacket, slacks, and shoes. Wear appropriate outerwear based on the weather. Sandals, t-shirts, tank tops, shorts, sweatpants, and ripped or torn pants are not permitted. Hats and ball caps will not be worn without the express consent of the supervisor overseeing the activity. Personal hygiene, grooming standards, and professional demeanor must also be compliant with Policy 1023 Personal Appearance Standards in order to participate.

Prohibited Items & Recording Policy

7. Do NOT bring prohibited items, including weapons of any kind (including legally-concealed weapons and pocket knives), restraint devices, portable video/audio recorders, transmitters, or two-way communication devices. Mobile phones are permitted.
8. Do NOT audio or video record, broadcast, or livestream. Photographs are allowed when permitted by the department member.

Rules of Conduct for Ride-Alongs & Field Observations

9. Do NOT intentionally involve yourself in any investigation, including handling evidence, conversing with victims or suspects, or reading an individual's criminal history or other protected information. You will be allowed to continue the ride-along during an arrestee's transportation and booking process, provided it does not jeopardize your safety and is permitted by jail staff.
10. Do NOT handle any police equipment unless expressly authorized by the department member.
11. Do NOT interfere with the performance of the members' duties. Immediately follow all directions.

Notwithstanding these rules, a supervisor may terminate your participation in the program at any time.

By signing below, I acknowledge that I have read, understood, and agree to abide by the **Citizen's Police Academy Rules and Code of Conduct**. I understand that violation of these rules may result in my removal from the program. I further acknowledge my consent and understanding of the background investigation required to participate in this program.

Participant Name: _____

Signature: _____

Date: _____

**** STOP! DO NOT SIGN THIS WAIVER NOW ****

You will sign this waiver in the presence of a Public Notary, which requires you to provide a valid and legal form of identification.

Waiver of Civil Liability and Indemnification Agreement

In consideration of the George Mason University Police Department of Fairfax, Virginia (“the Department”) granting me permission to participate in the Citizen’s Police Academy Program (“the Program”), I hereby waive any and all rights and claims of liability for damages, losses, personal injuries or death which I might suffer, sustain or cause while participating in the Program. I further waive any and all claims, demands, actions, damages, or suits at law or equity of whatever nature which I have or may hereafter acquire against George Mason University, the Department, its elected officials, officers, agents or employees, as a result of my voluntary participation in the Program; and I hereby hold harmless such persons and entities. In the event that a demand or claim, whether groundless or otherwise, is made against the entities and/or persons set forth herein, I agree to indemnify those persons and/or entities for all damages, attorney fees and costs incurred in defending said demand or claim. I further agree to comply with all rules and regulations of the Program and any instructions or orders issued by members of the Department in connection with the Program. I certify that I am aware of the potential risk involved in participating in all activities of the Citizen’s Academy and accompanying a police officer during the performance of his or her duties.

I acknowledge that I am signing the agreement freely and voluntarily and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law. I have read, understand, and am willing to comply with the Program rules. I further affirm that the information provided in this application is true and correct to the best of my knowledge and belief:

Signatures		
Applicant Signature	Printed Name	Date

Subscribed and sworn to before me on this _____ day of _____, 20_____

Notary Public

My commission expires: _____

Verification of Identification

You will sign in the presence of a police officer when you report for your appointment for program processing. Please bring your driver's license or other form of photo identification and your CJS training certificate with you.

Signatures		
Applicant Signature	Printed Name	Date
Signature of Verifying Officer	Printed Name	EIN

OFFICIAL USE ONLY—DO NOT WRITE BELOW THIS LINE

Application Status	
<input type="checkbox"/> Approved <input type="checkbox"/> Denied	If <i>denied</i> , explain:
Approving Supervisor	