



Community Academy Application

The Hayward Police Department's Community Academy is a certified educational program designed to give participants a working knowledge of the City of Hayward Police Department. It consists of a series of classes and discussions held once a week, on a designated evening for a period of two hours. Each academy consists of nine sessions. There is no cost to anyone who enrolls.

Community Oriented Policing plays an important and vital role in reducing crime in any community. Therefore the Hayward Police Department instituted the Community Academy in 1993 to improve communication and partnership opportunity with the community we serve. It is our hope that the graduates will become partners with us in identifying problems and solutions to the issues that may affect our community. Graduates will take their knowledge to their neighborhoods where they can use it to enhance the quality of neighborhood life.

This program provides an in-depth view into various areas of law enforcement. It is an educational and informative program that allows residents the opportunity to learn about the issues that affect law enforcement and community efforts in the City of Hayward.

Our intent, through education, is to build understanding, responsibility, accountability and partnership between members of the community, the police department and other service organizations.

Goals of the Community Academy

- To develop partnerships between members of the community and the Police Department.
- To promote open lines of communication between members of the community and the Police Department.
- To offer new insight on how the police do their job.
- To assist in providing a realistic view and clear understanding of the Police Department.

It is hoped that all graduates of the Community Academy will get to know more about the men and women who protect their community and why they make the decisions they do while performing that duty.

The academy is also intended to bolster the city's Neighborhood Alert program. Our aim is for Block Captains of Neighborhood Alert as well as participants in the Volunteers In Polices Services (VIPS) program to become involved with community partnerships and volunteer programs.

This application contains:

- The Guidelines for Participation in the Community Academy
- Community Academy Application and Waiver
- Declaration of Assumption of Risk and Release of Liability Form

Thank you for your participation.

**Hayward Police Department
300 West Winton Avenue
Hayward, California 94544**

Community Academy Guidelines

WHO CAN ATTEND THE COMMUNITY ACADEMY?

- Participants in the program must be at least 18 years old.
- Hayward residents are given first preference to participate in Community Academy.

HOW DO I APPLY TO ATTEND THE COMMUNITY ACADEMY?

- Applicants must fully complete the Community Academy Application.
- To participate in the program, the *Declaration of Assumption of Risk and Release of Liability* must be signed by the applicant.
- The application and waiver forms must be submitted at least ten working days before the start of the Community Academy's first session.
- Incomplete applications and applications without the signed waiver may be denied to attend the Community Academy.
- Participants may be subject to a background check.

Community Academy Application and Waiver

**Any person over the age of 18 years old.
Hayward Residents receive priority over non-Hayward residents.**

To participate in the Community Academy you must sign the waiver on the reverse side of this application. *If the waiver is not signed, your application and participation in the Community Academy may be declined.*

*Required Information

*Today's Date

*Last Name:	*First Name	*Middle Name:	*Gender : M F
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*Date of Birth: __ / __ / ____	*Age:	*Driver's License Number:	*State:
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*Address:	*City:	*State:	*Zip
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*Contact #: ()

*Email Address:

*Person to notify in case of an emergency:

*Name:	Relationship:	Phone:
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*Have you ever been arrested? (Circle one) No Yes (If "Yes", list arrests in the spaces below)

Date:	City & State:
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Date:	City & State:
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Date:	City & State:
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*Have you ever attended the Community Academy with the Hayward Police Department before? (Circle one) No Yes

List the years of your previous attendance:

Hayward Police Department Community Academy Declaration of Assumption of Risk and Release of Liability

*Required Information

*I, _____, the undersigned, not being a member of the Police Department of the City of Hayward, California (hereafter "City"), have made a voluntary request for permission to attend the Community Academy as a guest or observer in a Hayward Police Department building at a time when it is being staffed by a member or members of the Hayward Police Department during the active performance of their duties as police personnel.

I acknowledge that the work and activities of the Hayward Police Department are inherently dangerous and involve possible risks of injury, death, and damage or loss to person or property. I further understand such risks may arise from, but are not limited to, civil disturbances; explosions or shootings; assaults and/or battery; vehicular collisions; and the effects of wind, rain, fire, and gas. I freely and voluntarily assume all possible inherent risks, whether or not they are listed herein.

In consideration of my participation in the Community Academy that is the subject of this agreement, I do hereby release the City of Hayward, its officers, agents, employees, and volunteers from any and all liability arising out of my participation in this program. I hereby voluntarily release, discharge, waive and relinquish any and all actions or cause of action for personal injury, wrongful death, or damage to property or person occurring to participant arising as a result of participation in this activity.

It is the intention of the undersigned by this instrument to exempt and relieve the above named parties from liability for personal injury or death, damage and expense of loss to person or property caused by negligence.

The undersigned acknowledges that he, she, or they have read the above four paragraphs, are fully and completely aware of the potential dangers incidental to participating in this program, and are aware of the legal consequences of signing this release of liability.

*Signature

Date

(Return to 300 W. Winton Ave, Hayward or Fax to 510-886-2179)

----- DO NOT WRITE BELOW THIS LINE -----

CORPUS Check By & Date:

Warrant Check By & Date:

APPROVED: DENIED/REJECTED Date: By:

Message Left By & Date:

Unable to Notify By & Date: