

Application for 2025 Youth Citizens' Police Academy



Dates: April 17, 2025 through June 5, 2025 (Each Thursday) Times: 5:30 p.m. through 8:00 p.m.

Location: New London Police Department and Various Locations

Fee: None

Prior to submitting your application, please be sure that you are able to commit to the Academy schedule. Class size is limited.

Applications must be received at the New London Police Department **no later than April 11, 2025 @ 1PM**

Please drop off your application at 5 Governor Winthrop Blvd., New London, CT or you may email it to Community Resource Officer Christina Nocito at CNocito@newlondonct.org

New London Police Department

5 Governor Winthrop Boulevard

New London, CT 06320

Phone: 860-440-6673

www.newlondonpolice.com

www.facebook.com/NewLondonPolice

CNocito@NewLondonCT.Gov

Applicants should be at least 13 years of age and younger than 18 years of age.

Selected applicants will be notified by email on or before April 14, 2025.

Name: _____ Date of Birth: _____

Address: _____ City: _____ State: CT

Telephone Number: _____ Email Address (Required): _____

For use in conducting a background investigation of the applicant:

Circle One: Driver's License or State ID Number(if applicable): _____ State: _____

Place of Birth: City / County: _____ State: _____ Country: _____

VOLUNTARY

Gender: _____ Race: _____ Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____

Have you been or are you currently in any court action, civil or criminal? Yes _____ No _____

If yes, please give details below:

Guardian/Responsible Party Information - Emergency Contact

First Name: _____ Last Name: _____ Date of Birth: _____

Relationship to Applicant: _____ Phone - Home: _____ Phone - Mobile: _____

Address (no P.O. Boxes) _____

Secondary Emergency Contact Name: _____

Address: _____ Phone: _____

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Please tell us more about you:

T- Shirt Size: Adult: _____ Child: _____

Why are you interested in attending the 2025 Youth Citizens' Police Academy?

Have you previously participated in a Youth Citizens' Police Academy Program? Yes _____ No _____

If yes, please give the location and year: _____

Are you affiliated with a neighborhood association, civic group, or any volunteer activities? Yes ____ No ____ If

yes, please tell us about them: _____

Do you attend school in New London? Yes No

If Yes, What school and Grade Level

NOTICE: All applicants will be subject to criminal and motor vehicle history checks. Submission of this application signifies your understanding and acceptance of these terms.

Submission of an application does not guarantee your acceptance into the Youth Citizens' Police Academy.

Signature: _____ Date: _____
(Applicant)

Signature: _____ Date: _____
(Guardian)

NOTICE TO AND WAIVER BY PERSONS DESIRING TO OBSERVE AND/OR PARTICIPATE IN POLICE OPERATIONS

PARTICIPATION RELEASE – JUVENILE/LEGAL GUARDIAN

For and in consideration of being given the opportunity of observing and/or participating in police operations and functions of the New London Police Department by participation in the New London Youth Citizen's Police Academy, including but not limited to riding in cars operated by members of the New London Police Department and/or by any and all other means of observation or participation whatsoever, the undersigned does hereby:

1. Acknowledge that the activities and functions of the New London Police Department may involve risk of harm and that the undersigned has considered and understands the inherent risks of observing the work of the Police Department.
2. Waive, surrender and relinquish to the City of New London, CT any and all causes of action at law or in equity that may now or hereafter exist in favor of the undersigned against the said City of New London, its agents and employees on account of any injury to person or to property of others or of the undersigned which may arise out of the undersigned being permitted to observe police operations as above.
3. Agree to indemnify and save the said City of New London, its agents and employees from and against any and all claims, liabilities, judgments, costs and expenses on account of injury to the person or property of the undersigned which may arise out of the undersigned being permitted to observe and/or participate in police operations as above.
4. Acknowledge having read the foregoing.

Participating Student _____

Legal Guardian _____

Received by:

Officer:

Date:

Photo / Video Release

The New London Police Department would like permission to release photographs/videotape of your child while they are at the New London Youth Citizen's Police Academy. These photographs/videotaping may be released to a television network, to the newspapers or for educational purposes, including the New London Police Department website (www.newlondonct.gov/police) and social media sites.

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

I give permission for the release of the following:

Photograph(s)

Video

Both

None

I give permission for the release of my child's name: Yes No

Name of Child (print): _____

Parent/Guardian name (print): _____

Parent/Guardian signature: _____ Date: _____

Note - not authorizing the use of the child's images or name will not affect the acceptance of the child into the program