Onslow County Sheriff's Office

Junior Citizens' Law Enforcement Academy
Application for Enrollment

Instructions:

Please fill out the application packet in its entirety.

Please print or type all information. Only original signatures are allowed.

Complete all questions in detail and provide explanations as necessary.

If more space is needed, please submit additional pages, and reference the question number for each explanation.

IMPORTANT:

Truthful and complete responses to this application are required.

This information will be subject to confirmation by administrative investigation.

Excluding the statement above, all information recorded in this application will be used only to determine the suitability and qualifications of the applicant for enrollment only. Copies of this information will remain on file with the Sheriff's Office for one (1) year.

If the applicant is under the age of eighteen (18), the applicant must have the approval of their parent or guardian.

Applications shall be mailed or personally delivered to:

Onslow County Sheriff's Office
Attn: Capt. Dixon
Junior Citizen Law Enforcement Academy
717 Court Street
Jacksonville, NC 28540

Citizens' Law Enforcement Academy

Application for Enrollment cont.

APPLICATION

Name: _____ Date of Birth: _____
(Last) (First) (MI)

Preferred Name: _____ Sex: ☐ Male ☐ Female

Parent/Guardian Name: _____

Address: _____
(Number/Street) (City) (State) (Zip)

Home Phone: _____ Mobile Phone: _____

E-Mail Address: _____

School: _____ Last Grade Completed: _____

Emergency Contact: _____
(Name) (Phone #) (City) (Zip)

1. How long have you lived in Onslow County? _____
2. Have you previously attended any other class or program sponsored by a Law Enforcement Agency (i.e. City Police Academy, Explorers, etc.)? ☐ Yes ☐ No
   If yes, please explain: _____

Please explain why you would like to attend the Citizens' Law Enforcement Academy and what you expect to gain? (at least 200 words).

Citizens' Law Enforcement Academy

Application for Enrollment cont.

Your submission of this application implies that you will be able to attend each class for the six (6) weeks. Class size is limited to twenty-four (24) attendees, therefore, your attendance is required for graduation.

I, _____, hereby certify that the information provided in this application is true and complete to the best of my knowledge. The Onslow County Sheriff's Office is hereby authorized to make any investigation of my personal history it deems necessary for consideration to attend the Junior Citizens' Law Enforcement Academy. I understand that false or misleading information given in this application may result in disqualification from the Academy.

Candidate's Signature: _____ Date: _____

Citizens' Law Enforcement Academy
Application for Enrollment cont.

*****THIS PAGE MUST BE NOTARIZED*****

LIABILITY WAIVER

State of North Carolina

County of Onslow

WHEREAS, certain citizens and persons having business interests in the County of Onslow desire to participate in the Junior Citizens Law Enforcement Academy; and

WHEREAS, the Onslow County Sheriff's Office desires to facilitate their participation;

WHEREAS, if the candidate is under the age of eighteen (18) a parent or legal guardian makes the following assurances on behalf of the candidate;

NOW, THEREFORE, for good and valuable consideration, the undersigned covenants and agrees for myself, heirs and assigns, that I will not at any time make any claim or demand, nor sue or commence, nor prosecute, nor cause or allow to be prosecuted in my name, any action at law or in equity against the County or its agents and employees because of injuries, damages, or other losses sustained or resulting to me directly or indirectly because of my participation in any activities as a part of the Junior Citizens Law Enforcement Academy.

I fully understand that this covenant not to sue may be pleaded as a complete defense to any action that may be brought by me, my heirs or assigns.

I am executing this covenant freely and voluntarily.

This _____ day of _____, 20____.

Candidate Name: _____ Parent/Guardian Name: _____

Candidate Signature: _____ Parent/Guardian Signature: _____

Notary Public: _____

My Commission Expires: _____

(SEAL)

Citizens' Law Enforcement Academy
Application for Enrollment cont.

PHOTOGRAPH AND VIDEO RELEASE

I, _____, grant the Onslow County Sheriff's Office, its representatives and members the right to take photographs or videos of me and my property in connection with my involvement with the Citizens' Law Enforcement Academy.

I authorize the Onslow County Sheriff's office, its assigns and transferees to copyright, use and publish the same in print or electronically.

I agree that the Onslow County Sheriff's Office may use such photographs or videos of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and internet or social media content.

I have read and understand the above:

Candidate Name: _____ Date: _____

Candidate Signature: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____