



## LINDEN POLICE DEPARTMENT YOUTH POLICE ACADEMY

July 20 – July 24, 2020  
8:00 AM – 3:00 PM

- Available to Linden students graduating 6<sup>th</sup>, 7<sup>th</sup> and 8<sup>th</sup> grades
- Learn about the Linden Police Department and other local, state, and federal law enforcement agencies
- Receive basic training in police procedures/operations, criminal investigations, drill and ceremony and first aid!
- Demonstrations: K-9, SWAT, Bomb Squad and more!
- Have Fun!!!!!!!!!!

Please visit [www.linden-nj.org/departments/police](http://www.linden-nj.org/departments/police) to view the 2020 Youth Police Academy Application Form. Please provide the required information to reserve a space in the up-coming Linden Police Department Youth Police Academy. This does not guarantee participation as spaces are limited.

**\*It should be noted that applications WILL ONLY be accepted via e-mail and shall be submitted no later than May 8, 2020 at 3:00 PM.\***

Enrollment will be on a first come first serve basis.

No late applications will be accepted.

Any questions contact: Detective L. Paster  
at 908-474-8450 or [lpaster@lpdnj.org](mailto:lpaster@lpdnj.org)



## Linden Police Department

### Youth Police Academy

July 20 – July 24, 2020

Please provide the below information to reserve a space in the up-coming Linden Police Department Youth Police Academy. This does not guarantee participation as spaces are limited. Please e-mail the required information to Detective Leon Paster at [lpaster@lpdnj.org](mailto:lpaster@lpdnj.org) (no later than May 8, 2020 at 3:00 PM). **\*It should be noted that a more in depth application will be completed upon acceptance.\***

Full Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email Address (Parent): \_\_\_\_\_

Birth Date: \_\_\_\_\_ Male: \_\_\_\_\_ Female: \_\_\_\_\_ Grade Entering in Fall 2020: \_\_\_\_\_

School: \_\_\_\_\_

Parent/Guardian's Name(s): \_\_\_\_\_

Parent's Work Phone: \_\_\_\_\_ Parent's Cell Phone: \_\_\_\_\_

Alternate Contact Phone: \_\_\_\_\_

**NOTE: Please continue to check your e-mail throughout the application process, as this is how all information will be disseminated. Also, please monitor your SPAM box.**

#### Recruit Uniform Information

T-Shirt Size (Check One): **Youth:** L                      **Adult:** S      M      L      XL

Short Size (Check One): **Youth:** L                      **Adult:** S      M      L      XL

**NOTE: All Cadets will be issued two (2) Shirts, two (2) pairs of shorts, and one (1) baseball cap. Cadets are responsible to wear the listed uniform each day of the academy. Please provide accurate size for your child. Uniforms sizes cannot be changed once ordered.**



# LINDEN POLICE DEPARTMENT

## Youth Academy

### Code of Conduct

#### Code of Conduct

1. There will be no use and/or possession of tobacco products or drugs. Any student found to be in violation of this code will be immediately dismissed.
2. Students are required to arrive no later than 7:55 am. Students must be picked up no later than 3:00 p.m. (unless the permission to walk/bike home form is signed).
3. Students are expected to adhere to academy rules and regulations.
4. Students are required to obey all orders of academy instructors and are not to leave the classroom without express permission of the instructor.
5. Should a student become ill or injured, he/she is to report immediately to an instructor.
6. Use of obscene, vulgar, or profane language will not be tolerated.
7. Students will conduct themselves in a professional manner at all times.
8. Students will address instructors as sir or ma'am. Yes/no sir, or yes/no ma'am.

#### Dress Code

This academy has been developed to give each student the best possible learning experience. Therefore, it is necessary that students present themselves in a neat and well-groomed manner. A uniform consisting of hat, shorts, tee shirt, white socks, and sneakers will be worn at all times. Hair must be neat and not a distraction to other students. Wearing of jewelry is prohibited. Bicycle helmets are required of all students who ride a bicycle or skateboard to the academy.

#### Student Behavioral Contract

The purpose of this contract is to inform the undersigned student that he/she must comply with the provisions of the Linden Police Youth Academy and to specific terms set forth in this contract. The student understands that due to the nature of this academy, there will be zero tolerance rules in effect. Undesirable conduct, such as horseplay or a violation of the student code of conduct, will result in immediate removal of the student from the academy. This contract is in effect for the safety of all students and to maintain discipline and order. This contract represents an agreement by the student that he/she received a copy of the Code of Conduct and the student agrees to adhere to this code at all times while at the academy.

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Applicant Name: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_



# LINDEN POLICE DEPARTMENT

## Youth Academy

### Release of Liability Form

I, \_\_\_\_\_ the undersigned Parent/Guardian of \_\_\_\_\_, residing at \_\_\_\_\_ in Linden New Jersey, do hereby give my son/daughter permission to attend the Linden Police Department Youth Academy and in consideration of allowing him/her to participate in the above named program, I voluntarily and knowingly release and discharge the Youth Academy, Linden Police Department, City of Linden, facilities managers, and all instructors and participants in this program as well as all others who may be liable from all claims, present and future, known or unknown, in any manner arising out of his/her participation in the Linden Police Department Youth academy program. Participants will have the opportunity to be physically conditioned, including but not limited to daily physical training, and agility course; tour the Linden Police Department, JTG Center, Linden High School, Linden High School Academy Building, and Tiger Stadium; and will be viewing demonstrations from multiple county and federal agencies including, but not limited to Union County Sheriff's Department Canine Unit, and Union County Police Bomb Squad. Applicants will be held to an understanding of a paramilitary rank structure and the Code of Conduct set by the Linden Police Department. If at any time a cadet receives an injury, or will not be participating in a scheduled event, the Linden Police Department shall be contacted, via the main Communications Desk at (908)474-8500, at least two (2) hours prior to the scheduled arrival time so that a report may be filed. Failure to comply may result in discharge of the cadet.

This hold harmless agreement is a testament to my understanding of the above evidenced by my signature below.

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Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_



# LINDEN POLICE DEPARTMENT

## Youth Academy

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### Emergency Medical Information Form

*Medical Form must be filled out in its entirety. **Please Print.** Dependent on the applicant's past medical history, the City of Linden maintains the right to request a doctor's note for participation in any and all physical activities. This must be submitted prior to the first day of the academy. Supplied information will only be used in the event of a medical emergency.*

Full Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Male:  Female:

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Past Medical History: \_\_\_\_\_

\_\_\_\_\_

Other Pertinent History: \_\_\_\_\_

\_\_\_\_\_

Allergies: \_\_\_\_\_

Medications: \_\_\_\_\_

\_\_\_\_\_

Primary Care Physician: \_\_\_\_\_

Primary Care Physician's Telephone: \_\_\_\_\_

Health Insurance Carrier: \_\_\_\_\_

Preferred Hospital: \_\_\_\_\_

\_\_\_\_\_

### **Emergency Contact Information**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_



**LINDEN POLICE DEPARTMENT  
PERMISSION TO WALK/BIKE HOME**

I \_\_\_\_\_ (parent or guardian, please print) give my child \_\_\_\_\_ (juvenile's name) permission to walk or bike home unsupervised at 3:00 p.m. following dismissal from the Linden Police Youth Academy from any of the following locations: Linden Police Department (301 N. Wood Avenue), JTG Center (330 Helen Street), Linden High School Academy Building (128 W. Saint Georges Avenue), and Linden High School (121 W. Saint Georges Avenue). If we do not have this slip, your child will not be released without authorized adult supervision.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_



# LINDEN POLICE DEPARTMENT

## Youth Academy Photograph Release Form

Linden Police Department  
301 N. Wood Avenue  
Linden, NJ 07036  
Permission to Use Photograph

I grant the Linden Police Department, its representatives, employees and/or their designee the right to take photographs of me and my property in connection with the Linden Police Department Youth Academy. I authorize the Linden Police Department, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

I agree that the Linden Police Department may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

I have read and understand the above:

Applicants Name (Print): \_\_\_\_\_

Organization Name (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_