



**Urbana Police Division's Citizen Police Academy Application Form**

Applicants must be 18 years of age to apply and must live or work within the City of Urbana.

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ Email: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_

Emergency contact person/number: \_\_\_\_\_

Are you an Urbana resident: Yes / No If yes, how long? \_\_\_\_\_

Are you an Urbana employee: Yes / No If yes, how long? \_\_\_\_\_

Business name: \_\_\_\_\_

Business address: \_\_\_\_\_

Have you ever attended a Citizens Police Academy? Yes / No Where? \_\_\_\_\_

Have you ever been arrested for, convicted of, or cited for an offense other than a minor traffic offense? Yes / No If YES, on a separate sheet of paper, please explain your arrest in detail, listing dates, charges, locations and court disposition.

Explain why you would like to be enrolled in the Urbana Citizens Police Academy:

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Please review your answers carefully and read the following statement before signing and submitting your application.

I hereby certify that there are no willful falsifications, omissions or misrepresentations in the foregoing statements and answers to questions.

I consent to, and understand that the Urbana Police Division will conduct a thorough background investigation on me as part of this application process.

I understand that any omission or false statement on this application will be sufficient cause for rejection into the Urbana Police Division's Citizens Police Academy.

I understand that I may be photographed or videotaped during the course of this program. These pictures or videotapes will be used for media releases and informational promotions for this program.

Some classes may require walking and standing, as different facilities will be used or toured. Please inform us of any considerations or accommodations that you may need while participating in this program.

All information contained above is correct to the best of my knowledge.

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

Persons convicted of any felony, domestic violence, sex-related offenses, or crimes of moral turpitude will not be permitted into the Academy. Other arrests or convictions may be considered on a case-by-case basis, at the discretion of the Chief of Police. The Urbana Police Division reserves the right to deny admittance to the Academy.

Please return completed Applications:

Urbana Police Division  
Attn: Sgt. Jason Kizer  
205 South Main Street  
Urbana, Ohio 43078  
[jason.kizer@ci.urbana.oh.us](mailto:jason.kizer@ci.urbana.oh.us)



Urbana Police Division  
Citizen Police Academy

**WAIVER OF LIABILITY**

In exchange for participation in the activity of the Urbana Police Division's Citizens Police Academy, 205 South Main Street, Urbana, Ohio 43078 and/or use of the property, facilities and services of the Urbana Police Division and the City of Urbana, I agree, for myself and (if applicable) members of my family, to the following:

1. I agree to observe and obey all posted rules and warnings, and further agree to follow any oral instructions or directions given by the Urbana Police Division, or its employees as it pertains to the Citizens Police Academy program.
2. I recognize that there are certain inherent risks associated with the above described activity and I assume full responsibility for personal injury to myself, and further release and discharge the Urbana Police Division, and the City of Urbana, for injury, loss or damage arising out of my use of or presence upon the facilities of Urbana Police Division, whether caused by the fault of myself, the Urbana Police Division or other third parties.
3. I agree to indemnify and hold harmless the Urbana Police Division and the City of Urbana against all claims, causes of action, damages, judgments, costs or expenses, including attorney fees and other litigation costs, which may in any way arise from my use of or presence upon the facilities of the Urbana Police Division.
4. I agree to pay for all damages to the facilities of the Urbana Police Division and City of Urbana caused by my negligent, reckless, or willful actions.
5. Any legal or equitable claim that may arise from participation in the above shall be resolved under Ohio law.
6. I hereby assign and grant to the Urbana Police Division the right and permission to use and publish the photographs/film/videotapes/electronic representations and/or sound recordings made of me during the Citizens Police Academy, and I hereby release the Urbana Police Division and the City of Urbana, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with the activity from any and all liability from such use and publication. I hereby authorize the reproduction, sale, copyright, exhibit, broadcast, electronic storage, and/or distribution of said photographs/film/videotapes/electronic representations and/or sound recordings without limitation at the discretion of the Urbana Police Division, and I specifically waive any right to any compensation I may have for any of the foregoing.

I HAVE READ THIS DOCUMENT AND UNDERSTAND IT. I FURTHER UNDERSTAND THAT BY SIGNING THIS RELEASE, I VOLUNTARILY SURRENDER CERTAIN LEGAL RIGHTS.

Signature: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Emergency Contact (please print): \_\_\_\_\_

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

Witness Signature: \_\_\_\_\_

Dated: \_\_\_\_\_

Printed Name: \_\_\_\_\_