

MAHWAH POLICE DEPARTMENT  
LEADERSHIP ACADEMY  
CLASS #3

July 27<sup>TH</sup> - July 31<sup>ST</sup>, 2009

BUILDING TOMORROW'S LEADERS, TODAY

*COMMANDING OFFICER* - OFFICER ROBERT CURTIS

*EXECUTIVE OFFICER* - OFFICER JOE HORN

THE LEADERSHIP ACADEMY WILL BE HOSTED AT RAMAPO COLLEGE, 505 RAMAPO VALLEY ROAD, MAHWAH, NEW JERSEY. THE WEEK LONG ACADEMY WILL INCLUDE A TWO NIGHT STAY OVER IN DORMITORY STYLE LODGING ON JULY 29<sup>TH</sup> AND JULY 30<sup>TH</sup>, 2009

# MAHWAH POLICE DEPARTMENT LEADERSHIP ACADEMY

The Leadership Academy is a course that has been designed by the officers of the Mahwah Police Department. The Leadership Academy is a character-building program designed to foster respect, responsibility and trust, and it establishes mutually beneficial relationships between students and law enforcement

## LEADERSHIP ACADEMY REGISTRATION FORM

### STUDENT INFORMATION

LAST NAME \_\_\_\_\_ FIRST \_\_\_\_\_ MIDDLE INITIAL \_\_\_\_\_

ADDRESS \_\_\_\_\_  
STREET AND NUMBER CITY, STATE AND ZIP

HOME TELEPHONE NUMBER \_\_\_\_\_

AGE \_\_\_\_\_ SCHOOL \_\_\_\_\_ YEAR IN SCHOOL \_\_\_\_\_

T-SHIRT SIZE (ADULT SIZE) PLEASE CIRCLE - S M L XL

### PARENT AND EMERGENCY CONTACT INFORMATION

PARENT NAME \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS \_\_\_\_\_ DAYTIME PHONE \_\_\_\_\_

WORK PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

PARENT NAME \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS \_\_\_\_\_ DAYTIME PHONE \_\_\_\_\_

WORK PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

## PLEASE LIST ALTERNATE EMERGENCY CONTACT INFORMATION

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_ CONTACT PHONE# \_\_\_\_\_

CELL PHONE # \_\_\_\_\_

## FAMILY PHYSICIAN

NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

DATE OF LAST PHYSICAL OR OFFICE VISIT \_\_\_\_\_

## CONFIDENTIAL MEDICAL QUESTIONNAIRE

1. Is your child being seen for medical reasons that we should be aware of? If yes, please explain.

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2. Does your child have any allergies or is he/she taking and medications that we should be aware of? If yes, please explain. Please be specific. Does your child have any allergies, including food allergies, or does your child have any special dietary needs?

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3. Has you child ever been hospitalized? If yes, please explain.

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4. Does your child have high blood pressure? \_\_\_\_\_

5. Does your child suffer from any heart problems? If yes, please explain.

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6. Has your child ever suffered from exhaustion or heatstroke?

\_\_\_\_\_

7. Are there any medical problems or disabilities that may affect your child during this event?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Does your child have a learning disability? (We want to make this experience memorable and this knowledge will help us do that.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Is your child presently taking any medications that we should be aware of? (Prescription or over the counter)?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. The Academy Includes a Two Night Over in Dormitory Style Lodging. Does your child suffer from any type of Sleep Disorders? If so, Please Explain

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parents:

I understand that the health history statement is true and that my child is able to participate in the Mahwah Police Department Leadership Academy. I further grant permission for my child to participate in all physical activities to be held by the Mahwah Police Department Leadership Academy.

Signature \_\_\_\_\_ Relationship \_\_\_\_\_

Date \_\_\_\_\_ Name (Printed) \_\_\_\_\_

#### Sleepover Information

The Leadership Academy includes a two night sleepover in dormitory style lodging. While we encourage participation in the sleepover as part of the learning experience of the Leadership Academy attendance is not mandatory. Will your child be participating in the two night sleepover?

Yes \_\_\_\_ No \_\_\_\_

Please understand that we are limited by the type of dorm accommodations provided to us by Ramapo College. While we will make every effort to accommodate roommate requests we cannot guarantee students will be able to select their chosen roommates.

MAHWAH POLICE DEPARTMENT  
2009 LEADERSHIP ACADEMY

MEDICAL EMERGENCY TREATMENT SLIP

In case of medical emergency, our physician is:

\_\_\_\_\_ Phone Number \_\_\_\_\_

I hereby authorize the above physician and/or designated associates or assistant or their covering physicians, or in the event these persons cannot be contacted, the emergency physician on duty at the hospital to provide emergency treatment to our child for the following:

1. Any laceration, fracture or other traumatic injury; or
2. Any symptom, disease or injury which, in the judgment of the attending physician, if untreated, reasonably may be expected to increase the risk of or threaten the health or life of the child, or threaten disfigurement or impairment of his/her facilities.

No major surgery or life threatening procedures may be performed upon my child and no general anesthesia may be administered unless:

1. The life or health of my child is in danger; or if delaying such treatment to obtain consent would create a threat of serious injury to the health of my child; and
2. The attending physician and one other physician consult and agree that such treatment is necessary for the health of my child.

I hereby give my consent for admission of my child to:

\_\_\_\_\_  
(Fill in name of hospital or indicate any accredited hospital)

If, in the judgment of the attending physician, it is necessary for any treatment authorized herein. This consent is to be effective only after reasonable efforts have been made to contact me and obtain my specific consent to any emergency treatment. This consent is also to be used in conjunction with the hospital's procedure for documented administrative authorization.

The child covered by this form:

\_\_\_\_\_  
(Child's full name)

\_\_\_\_\_  
(Date of Birth)

\_\_\_\_\_  
(Parent's Signature)

\_\_\_\_\_  
(Relationship)

\_\_\_\_\_  
(Date)

# STUDENT BEHAVIORAL CONTRACT

The purpose of this contract is to inform the student that he/she must comply with all provisions of the Mahwah Police Department leadership Academy and to the 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 dangerous horseplay, bullying, or rude behavior to fellow students, or a violation of the student code of conduct will result in removal of the student from the academy. This contract is in effect for the safety of all students and the maintenance of 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 of Conduct at all times, at home, in school and at the academy.

\_\_\_\_\_  
SIGNATURE OF PARENT/GUARDIAN

\_\_\_\_\_  
SIGNATURE OF STUDENT

\_\_\_\_\_  
DATE

## HOLD HARMLESS AGREEMENT

I, the undersigned parent/guardian residing at \_\_\_\_\_, Township of Mahwah, State of New Jersey, do hereby give my son/daughter permission to attend the Mahwah Police Department Junior Police Academy and in consideration of allowing him/her to participate in the above named program I voluntarily and knowingly release and discharge the Mahwah Police Department Leadership Academy, Mahwah Police Department, Township of Mahwah, Mahwah Municipal Alliance 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 matter arising out of his/her participation in the Youth Leadership Academy.

I also acknowledge that (child's name) \_\_\_\_\_ has no limited medical conditions and is fully capable of participating in the program. This hold harmless agreement is a testament to my understanding of the above evidenced by my signature.

\* As a way of promoting the leadership Academy photography and video imagery will be taken during academy sessions which might be used on the Township of Mahwah and/or Mahwah Police Department website or appear in local newspapers.

I have read and fully understand and agree to the above stated conditions of participation in the Leadership Academy

Signature \_\_\_\_\_

Date \_\_\_\_\_

# MAHWAH POLICE DEPARTMENT - YOUTH LEADERSHIP ACADEMY

## CODE OF CONDUCT

1. There will be no use and or possession of tobacco products, alcohol or drugs on academy property. Anyone found to be in violation of this code will be immediately dismissed and appropriate actions will be taken.
2. Students are required to arrive between 8:15 am and 8:30 am. Morning formation will be at 8:40 am each day. Parents/Guardians can pick up students at 2:30 pm.
3. Students are required to adhere to all academy rules and regulations, policies and procedures.
4. Students are required to follow the directions and orders of the academy staff, for their own safety at all times. No students will leave the classrooms, fitness areas, or academy grounds without the express permission of the academy instructors.
5. Should a student become ill or injured he/she is expected to report immediately to the instructor.
6. Use of obscene, vulgar or profane language will not be tolerated.
7. When an instructor, guest speaker or adult enters a room, all students will stand at attention with their arms at their sides.
8. When asking a question, or speaking, the student will state their name, and then continue with verbal communication.
9. All students will answer the instructors, guest speakers, and adults at the academy with "Yes Sir/Ma'am" or "No Sir/Ma'am"
10. **STUDENTS WILL CONDUCT THEMSELVES IN A PROFESSIONAL MANNER AT ALL TIMES.**
11. **All students will be responsible to pay for any damage or lost academy/police/school or college property assigned to them during the academy. (i.e. key swipe cards)**

## DRESS CODE

- All t-shirts, shorts and sneakers will be **neat and clean** and kept in good condition each day.
- Shorts shall be tan or khaki in color for the uniform of the day (With Blue or White t-shirt)
- Shorts will be of a reasonable length and not of a "form fitting" nature (eq. No "Short Shorts")
- Hair will be neat and not a distraction to other students.
- Wristwatches are permitted for all students. All other jewelry (i.e. earrings, necklaces, rings, anklets and bracelets) are not permitted, except medical alert identification jewelry.
- All Shirts will be tucked in.