

**REDMOND POLICE DEPARTMENT**  
Community Police Academy Application

**APPLICANT INFORMATION**

Name:

Date of birth:

Phone:

Email:

Current address:

City:

State:

ZIP Code:

Current employer:

Employer address:

City:

State:

ZIP Code:

Driver's License State:

Driver's License #:

Concealed Pistol License:    Yes     No

**EMERGENCY CONTACT**

Name:

Phone:

Relationship:

**CRIMINAL HISTORY**

Have you ever been convicted of a felony?    YES     NO

If yes, please explain:

**INTEREST**

Why do you want to attend the Citizen's Academy?

**PHOTO RELEASE**

During your participation in the Redmond Police Citizens' Academy, photographs may be taken to document activities and events and may be used for the Redmond Police Department for community outreach and public affairs purposes. By checking yes, you agree to release and authorize any photographs, as described above, to be used by the Redmond Police Department.

YES     NO

**RELEASE, WAIVER, AND HOLD HARMLESS AGREEMENT**

The undersigned desires to observe the operation of the Redmond Police Department and, therefore, is applying for attendance in its Citizens' Police Academy. I understand that acceptance into the Academy is contingent upon successful completion of a criminal history check.

For and in consideration of my participation in the Redmond Police Department Citizens' Police Academy, I hereby release from liability for any injuries or damage I may sustain, and I agree to save, defend, indemnify, and hold harmless the City of Redmond, the Redmond Police Department, its officers, employees, volunteers, and agents from any and all claims, real or imaginary, which may be filed against them or any act of omission of the undersigned during the Academy. This release, waiver, and hold harmless agreement applies to and is binding upon the undersigned and his/her heirs, successors, and assigns.

I further understand that the Redmond Police Department will be conducting a criminal history records check, including local, State and Federal databases. I give my full permission for such criminal history check to be conducted.

Signature of applicant:

Date:

Printed Name of Applicant:

**Please email or mail application (no photocopies) to:**  
**Redmond Police Department**  
**c/o James Perry**  
**8701 160<sup>th</sup> AVE NE**  
**Redmond, WA 98052**

**Official Use:**

Approved: Yes  No

By:

Date: