

# St Johns County Sheriff's Office Civilian Law Enforcement Academy

To our students,

The Civilian Law Enforcement Academy is a program that is designed to provide the public with a working knowledge of their Law Enforcement Agency's mission, operation, policies and personnel. This class is aimed at creating a mutual trust between the police and residents. Civilian Law Enforcement academies provide a productive outlet for the mutual sharing of information and concerns in order to further common goals of communities and Law Enforcement Agencies.

**Completion of the Civilian Law Enforcement Academy will not enable you, as a citizen, to take any law enforcement action.** However, it will give you enough insight into what we do to make a difference in our law enforcement efforts.

## **St Johns County Sheriff's Office Civilian Law Enforcement Academy Waiver, Release and Indemnification**

The St Johns County Sheriff's Office (**the "SHERIFF"**) conducts a course known as the "Civilian Law Enforcement Academy", open to local citizens in which citizens are exposed to all major aspects of the operations of the **St Johns County Sheriff's Office**, including particularly (but without limitation), class sessions at the First Coast Technical Center. In consideration for the privilege and benefits to be derived from participating in the Civilian Law Enforcement Academy, the SHERIFF is requiring all participants therein to execute this waiver, release and indemnification.

Participation in the Civilian Law Enforcement Academy class sessions may involve physical activities such as, but not limited to, lifting, walking, riding, discharging of firearms and will include such risks as falls, interaction with other participants, effects of weather, the physical conditions of the facilities and features and equipment located thereon, together with the inherent risks of being in close proximity to the discharge of firearms and the utilization of various items of equipment and other weaponry used by law enforcement personnel. Participant expressly assumes these and all other risks arising in any way out of participant's participation in the Civilian Law Enforcement Academy activities; including transportation provided to, from and between such activities. Participant represents and warrants him/herself to be physically fit and able to participate in such activities, and agrees to stop and request assistance if experiencing any symptoms or other conditions which would make it difficult or unsafe to continue; further understanding that the Participant is solely responsible for their own health and safety. Participant understands that during all Civilian Law Enforcement class times, the privilege of their participation shall be governed by the SHERIFF (inclusive of SHERIFF'S deputies, officials, representatives and employees) and Participant will abide by and follow any directions given by such SHERIFF'S personnel.

On behalf of the Participant's self, heirs, executors and assigns, Participant does hereby waive and personally assume any and all risks and liability for damages, losses, personal injuries and death which Participant may suffer, sustain and cause while participating in any activities of the Civilian Law Enforcement Academy and

Participant does hereby release and forever discharge the ST JOHNS COUNTY SHERIFF'S OFFICE, SHERIFF DAVID SHOAR, and his deputies, officers, agents, employees, representatives and other personnel (in their official and individual capacities), the County of St Johns, Florida and the owners and personnel of the First Coast Technical Center or other premises and facilities used by the Sheriff for the Civilian Law Enforcement Academy activities (collectively, the "Releasees") from any and all claims, demands, actions, damages or suits at law or equity of whatever nature which Participant has or may hereafter acquire against the Releasee as a result of Participant's voluntary participation in the afore described activities and Participant hereby holds harmless and agrees to indemnify Releasees for all damages, attorneys fees and costs which may be incurred in defending any such demands, claims, actions and the like.

WITNESSES: (Two witnesses)

YOUR SIGNATURE:

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Signature

---

Signature

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Printed Name

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Printed Name

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Signature

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Address

---

Printed Name

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Date

**Return completed application to:**

**Sgt Bonnie McCullough**  
**4015 Lewis Speedway**  
**St Augustine, Fl 32084**  
**904-810-6631 (office)**  
**904-810-6657 (fax)**  
**Email: [bmccullough@sjso.org](mailto:bmccullough@sjso.org)**

# St Johns County Sheriff's Office

"In partnership with the community..."

## CIVILIAN LAW ENFORCEMENT ACADEMY APPLICATION

Please Print Legibly

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ (must be 18 or older)

Sex: \_\_\_\_\_ SSN #: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

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

How long at above address: \_\_\_\_\_ Phone: \_\_\_\_\_

Drivers License #: \_\_\_\_\_ State: \_\_\_\_\_ Age: \_\_\_\_\_

E-Mail address (optional) : \_\_\_\_\_

Occupation: \_\_\_\_\_

Name of company/business where you are currently employed or retired from:

\_\_\_\_\_

Do you know anyone employed by the St Johns County Sheriff's Office: \_\_\_\_\_

If yes, who: \_\_\_\_\_

Have you ever been convicted of a crime (excluding traffic violations): \_\_\_\_\_

If yes, provide details: \_\_\_\_\_

\_\_\_\_\_

What is your motivation for wanting to attend the Civilian Law Enforcement Academy:

\_\_\_\_\_

Please provide two references:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Phone

**ALL INFORMATION IN THIS APPLICATION IS STRICTLY CONFIDENTIAL**

PLEASE READ AND INITIAL BY EACH OF THE FOLLOWING:

\_\_\_\_\_ I understand the St Johns County Sheriff's Office Civilian Law Enforcement Academy will meet one night a week from 6:00 pm-10:00 pm for eight (8) weeks.

\_\_\_\_\_ I understand individuals selected to participate in the Academy are expected to attend all sessions and to participate in class activities.

\_\_\_\_\_ I understand that I must be willing to commit to these attendance requirements in order to successfully graduate.

\_\_\_\_\_ I understand that I may miss no more than one (1) class in order to be eligible for graduation.

\_\_\_\_\_ I understand that should circumstances cause me to miss more than one (1) class, I will be afforded the opportunity to make up the missed class in the next Academy, after which I will be eligible for graduation.

\_\_\_\_\_ I understand that I will be subject to a criminal background inquiry before being accepted into the program.

\_\_\_\_\_ I understand that children are not allowed to attend any of the classes with me and are not to be on the premises during Academy hours.

\_\_\_\_\_ I understand the Sheriff reserves the right to exclude any applicant from consideration whose participation is deemed not to be in the best interest of the St Johns County Sheriff's Office and/or the applicant.

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