

MUNICIPALITY OF ANCHORAGE
Anchorage Police Department

Pathway to Policing
APD Youth Academy
June 5-8, 2017

What does law enforcement do? How do men and women protect an entire city? Have you ever thought about becoming an officer or working at a police department? The APD is hosting a four-day Youth Academy to expose teenagers to the field of law enforcement. In this academy, you'll learn from the experts and participate in activities that will show you what it's like being a public safety leader in this community.

You must submit an application for the APD Youth Academy, which is open to any teen who meets the following established criteria:

- a) Participants must be between the ages of 16 and 18
- b) Participants must pass a background investigation
- c) Participants must reside or attend school within the Municipality of Anchorage
- d) Participants must have parent/guardian permission to participate

Application deadline is 5:00 p.m. Friday, May 12, 2017

ACADEMY DATES, HOURS, LOCATION:

The APD Youth Academy will take place **Monday June 5, 2017 through Thursday, June 8, 2017 from 9:00 a.m. to 3:00 p.m.** Classes will be held at the APD Training Center located at 3760 W. Dimond Blvd. Students will receive a one-hour lunch break daily from 12:00-1:00.

Participants are required to attend all hours of classes. Upon completion of those hours, participants will receive a Certificate of Participation from the Anchorage Police Department. Participants must be able to have their own transportation to and from the academy. Participants are asked to dress in professional/business casual attire.

There is no cost to participate in the APD Youth Academy

APD YOUTH ACADEMY COURSES INCLUDE (but not limited to):

- Day in the Life of an Officer
- School Resource Officer 101
- Investigating a Serial Killer
- Dangers of Driving Under the Influence
- How to Speak Police Code/Dispatch Communications
- SWAT and Less Lethal Tactics
- Crime Scene Investigations
- Investigations
- K9 Demonstration
- Cyber Crimes

APPLICATION INSTRUCTIONS

Please make sure you fill out the entire application. Incomplete applications and applications received after the deadline will not be processed.

Application forms may be downloaded from the APD website (www.muni.org/apd) or obtained at the Anchorage Police Department Headquarters.

Completed applications may be dropped off at the front counter of the Anchorage Police Department located at 4501 Elmore Road, Anchorage, Alaska 99507-1599. They may also be emailed to ashell@muni.org

The Youth Academy will accommodate up to 30 participants. Participants will be accepted on a first come, first serve basis pending approval of their application and background investigation.

For questions regarding the APD Youth Academy, contact Lt. Rollins at 786-8871 or Specialist Anita Shell at 786-8664.

Deadline: Applications MUST be received no later than 5:00 p.m. Friday, May 12, 2017.

Application Number (for official use): _____

ANCHORAGE
POLICE DEPARTMENT
PATHWAY TO POLICING
YOUTH ACADEMY 17-1
APPLICATION FOR ADMISSION



Ethan Berkowitz
Mayor of Anchorage

Chris Tolley
Chief of Police

Youth Academy 2017-1

You must be able to answer YES to all of the following questions. If you cannot answer YES to all, your application will not be processed. Please circle your response.

A. Do you live or attend school within the Municipality of Anchorage? YES NO

B. Would you be willing to commit to full attendance of the Youth Academy from June 5-8, 2017, from 9:00 AM to 3:00 PM? YES NO

C. Are you between the ages of 16 – 19? YES NO

D. It is important that Youth Academy participants have not recently engaged or expect to engage in any activity that is criminal, unethical, or improper in nature that might publicly embarrass or cause problems for other Youth Academy participants or the Anchorage Police Department. Do you meet this requirement?
YES NO

As a Youth Academy participant you may be observing graphic material and hearing graphic details of police work, therefore, if you are under the age of 18, parent or guardian permission is required for you to participate in the academy (please see page 4 of this application). Applications without a parent or guardian signature will not be accepted.

Student Name: _____
Last First Middle Nickname

Current Home Address: _____
Street City/State/Zip

Current Mailing Address: _____
Street/P.O. Box City/State/Zip

T-SHIRT SIZE (Adult Sizes): ___ Small ___ Medium ___ Large ___ X-Large ___ XXL

Home Phone _____ Cell Phone _____ Message _____

E-Mail _____

DATE OF BIRTH: ___/___/___ DRIVERS LICENSE/ID NUMBER: _____ STATE: _____

EMERGENCY CONTACT INFORMATION:

Mother:

Father:

Guardian:

Name: _____

Cell #: _____

Work #: _____

Email: _____

Daytime Address: _____

NOTE: A past criminal record alone does not prohibit an individual from participating.

CRIMINAL HISTORY: Have you ever been arrested and/or convicted of a crime other than a traffic infraction? YES NO If YES, please explain below.

Dates	Location of Occurrence	Crime

1. Which school are you currently attending? What grade are you in now?

2. Why would you like to participate? Are you considering a career in law enforcement?

3. Please describe something that police do that you don't understand. Perhaps this is something that happened to you, you observed, or you saw on television or read about.

4. Have you had mostly positive or negative experiences with the police? Please describe one positive or negative experience.

5. There is always room for improvement. Please describe something you feel the Anchorage Police Department could do better.

6. Is there any other information that you would like us to know about you that you think might be helpful?

I understand that the APD Youth Academy is a three-day program with classes meeting as described on the attached instructions page. Due to the class size being limited, I understand the importance of my commitment to attend all of the classes. Furthermore, I attest that the above information provided by me is true and accurate to the best of my knowledge and authorize the Anchorage Police Department to conduct a criminal history and background check on me.

SIGNATURE OF APPLICANT

DATE

I am authorizing my son/daughter to attend the 2017 APD Youth Academy at the APD Training Center. I understand that my son/daughter may see graphic images and hear graphic details related to police work. Furthermore, I consent to the participation in interviews, the use of quotes, and the taking of photographs, movies or video tapes of my child by the Anchorage Police Department. I grant the right to edit, use, and reuse said products for non-profit purposes including use in print, on the internet, and all other forms of media. I also hereby release the APD and its agents and employees from all claims, demands, and liabilities whatsoever in connection with the above.

SIGNATURE OF PARENT

DATE

RETURN COMPLETED APPLICATION TO:
Youth Academy 17-1
Anchorage Police Department
4501 Elmore Road, Anchorage, AK 99507-1599
Or email application to: ashell@muni.org

FOR APD USE ONLY
DATE RECEIVED: _____ DATE BACKGROUND COMPLETED: _____ BY: _____
ACCEPTED: YES ___ NO ___ REASON FOR DENIAL: _____
DATE NOTIFIED: _____ VIA: LETTER: _____ PHONE: _____ BY: _____