



RANDOLPH COUNTY SHERIFF'S OFFICE

CITIZENS ACADEMY APPLICATION

APPLICANT INFORMATION

Full Name: _____

Date of Birth: _____ SSN (last 4): _____

Street Address: _____

City: _____ State/Zip Code _____

E-Mail: _____

Phone: _____

EMPLOYMENT INFORMATION

Current Employer: _____

Street Address: _____

City: _____ State/Zip: _____

Phone: _____

Job Title: _____ Time with Employer: _____

EMERGENCY CONTACT(S)

Name: _____

Street Address: _____

City: _____ State/Zip: _____

Relationship: _____ Phone: _____

Name: _____

Street Address: _____

City: _____ State: _____

Relationship: _____ Phone: _____



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FAMILY INFORMATION

Spouse Name: _____

Date of Birth: _____ Phone: _____

Employer: _____

Position: _____ Time with Employer: _____

Number of Children: _____ Age(s): _____

COMMUNITY INVOLVEMENT

Please list any community organizations you are a part of or community activities that you participate in.

Organization/Activity Name: _____

Organization/Activity Name: _____

Organization/Activity Name: _____

Organization/Activity Name: _____

ACKNOWLEDGEMENT

By signing below I acknowledge that all the information provided on this application is true and accurate to the best of my knowledge. I also understand that any misrepresentation or falsification of information will result in my denial or removal from the academy.

Signature

ELECTRONIC SIGNATURE OPTION

By clicking I ACCEPT using any device, means or action, I acknowledge that all the information on this application is true and accurate to the best of my knowledge. I also understand that any misrepresentation or falsification of information will result in my denial or removal from the academy.

I ACCEPT

RANDOLPH COUNTY SHERIFF'S OFFICE

Release and Indemnity Agreement

WHEREAS, I, the undersigned has voluntarily elected to ride as a passenger/observer in a patrol vehicle of the Randolph County Sheriff's Office, Randolph County, North Carolina and to accompany officers of said agency while engaged in the performance of their duties, to study and observe for his/her own benefit the functions and operations of the Randolph County Sheriff's Office and it's personnel; and

WHEREAS, the undersigned, if an employee of the County of Randolph not regularly assigned to operate patrol vehicles or any Law Enforcement Officer not involved in official Investigation, understands that said travel and observation does not constitute job performance "arising out of" or "in the course of" employment for the purposes of the Counties coverage Workman's Compensation; and

NOW THEREFORE, for and in consideration of the opportunity to ride with and observe a law enforcement office/employee of the Randolph County Sheriff's Office in the performance of his/her duties, I, the undersigned, do hereby agree as follows:

a) I Assume full responsibility for any personal injury or damage to my person or property and I hereby waive myself, my heirs, executors, administrators, or assigns, any and all claims, demands, actions, or causes of action against Randolph County, the Randolph County Sheriff, its officers, agents and employees if whatever kind or nature may arise in any manner by reason of injury or damage to my person or property or both while I am riding in Sheriff's Office vehicles, while observing any operation, while accompanying deputies of said agency in the performance of their duties, or while participating in this program in any other manner; and

(b) I do hereby covenant and agree that I will never instigate and suit or action against Randolph County, the Randolph County Sheriff's Office, it's officers, agents, or employees for damages or loss or injury of any kind for or on account of any damages, loss or injury to my person or property or both which may arise in any manner while I am riding in Sheriff's Office vehicles, while observing and operation, or participating in this program in any other manner; and

(c) I do hereby indemnify and hold harmless Randolph County, the Randolph County Sheriff's Office, its agents and employees, for any acts of conduct committed y me of whatever kind or nature whatsoever, while I am riding in Sheriff's Office vehicles, observing any operation, or participating in this program in any other manner and I further agree to defend and pay any costs, judgments or attorneys' fees resulting from said action or conduct so committed by me;

(d) This agreement holds harmless Randolph County, the Randolph County Sheriff's Office, its officers, agents and employees for any injury, including but not limited to claims for wrongful death, arising in any manner to me while participating in this program.

I have read the foregoing waiver and covenant not to sue and understand that it constitutes a formal legal document.

Print Name

Date

Signature

Date

Sworn to and subscribed before me this _____ day of _____, 20____

Notary

My commission expires: _____