



Registration for Basic Training Course for Full-Time Officers

COURSE DATES: _____ AGENCY: _____

APPLICANT NAME: _____ DOB: ____/____/____
LAST FIRST MIDDLE

APPLICANT ADDRESS: _____
(STREET, CITY, STATE, AND ZIP)

LAST 4 DIGITS OF SSN: _____ CALIBER OF AMMUNITION USED FOR DUTY: _____

TO BE READ AND SIGNED BY EMPLOYING AGENCY OR DEPARTMENT HEAD

This applicant fully meets the entry standards of the Vermont Police Academy in accordance with Rule 17 of the Vermont Criminal Justice Training Council. I understand that the State of Vermont provides minimum basic training for law enforcement officers pursuant to 20 V.S.A., § 2355 (5). This training is for “law enforcement officers who are appointed on a permanent basis.” VCJTC Rule #8 entitled Basic Training Standards for Full-Time Law Enforcement Officers states “(a) Any sworn, commissioned member of a municipal police department, county sheriff’s office, state law enforcement agency or political sub-division thereof who is paid on a full-time basis and has authority, except where excluded by statute, to enforce the criminal laws of this state as a law enforcement officer as defined by Title 20, Chapter 151, must complete the basic course at the police academy...” The intent of the statute and the Council rule is to provide full-time training, at state expense, for full-time sworn or commissioned officers. In order to insure that all applicants for such training are appointed as law enforcement officers prior to entering the school, we require the following certification from the department administrator.

I CERTIFY THAT THE APPLICANT NAMED ABOVE HAS BEEN APPOINTED AS A FULL-TIME LAW ENFORCEMENT OFFICER WITH AN EFFECTIVE DATE OF _____ IN ACCORDANCE WITH RULE #17 OF THE VCJTC RULES AND REGULATIONS AND FURTHER THAT HIS/HER CONTINUED FULL-TIME EMPLOYMENT IS DEPENDENT UPON HIS/HER SUCCESSFUL COMPLETION OF THE PRESCRIBED TRAINING PROGRAM.

Signature of Agency Head

Department

Date

Training Release, Waiver and Indemnification for students

This release is made by _____, DOB _____ of the Town of _____, County of _____, State of _____.

I, on my behalf and on behalf of my heirs, next of kin, executors, administrators, estate, agents, and assigns, and representatives of any nature whatsoever, for and in consideration of being accepted as a student of the Vermont Policy Academy do hereby WAIVE AND RELEASE the State of Vermont, the Criminal Justice Training Council, the Vermont Police Academy, and all of their agents, employees, former employees and representatives from all demands, damages, actions, causes of action, suits and claims of any nature whatsoever, that I or my heirs, next of kin, executors, administrators, estate, agents, and assigns and representatives of any nature whatsoever, might otherwise have on account of death or injuries, both to person and to property, whether foreseeable or not, which may occur, directly or indirectly, or develop at any time in the future, as a result of my activities and association in the weapons classes, firing exercises and all other instruction and participation in the activities of the Vermont Police Academy.

I, the undersigned, have read this release in its entirety and understand all its terms. I execute it voluntarily and with full knowledge of its significance.

In witness whereof I have executed this release on this _____ day of _____ in the year of _____.

Signature of sponsored student

At Town of _____, County of _____, State of _____, personally appeared and acknowledged the above instrument, sealed and subscribed by him/her, to be his/her own free act and deed and made with full knowledge of its significance.

Before Me, _____
Notary Public

The following to be completed by the student's employing agency

The above-references student, _____, is currently an employee of _____
Name of student/employee

Law enforcement Agency

In consideration of the training to be received by its employee, the law enforcement agency does hereby enter into this release from liability and indemnification agreement.

Intending this agreement to be legally binding on the Law Enforcement Agency, its employees, administrators, and assigns, the law enforcement agency hereby waives, releases, and holds harmless the State of Vermont, the Criminal Justice Training Council, the Vermont Police Academy, and all of their agents, employees, former employees and representatives from all claims, demands, rights, causes of action and judgments of whatsoever kind and nature, arising from and by reason of death, physical or mental injuries and consequences thereof which may be suffered by its employee during the above-referenced Vermont Police Academy training program including physical fitness testing.

The law enforcement agency also hereby agrees to indemnify and hold harmless the State of Vermont, the Criminal Justice Training Council, the Vermont Police Academy, and all of their agents, employees, former employees and representatives from any and all claims made by any other party or entity arising from its employee's participation in the above-referenced Training provided by the Vermont Policy Academy.

The law enforcement agency recognizes that the failure to fully accept the terms and conditions of this waiver may result in its employee being refused admittance into the training program.

As the signatory below, I hereby represent and warrant that I have the right, power, and authority to enter into this agreement, that I have taken all requisite action to approve execution, delivery, and performance of this agreement, and that this agreement constitutes a legal, valid and binding obligation upon itself in accordance with its terms.

Signature of Agency Head

Date

At Town of _____, County of _____, state of _____, personally appeared and acknowledged the above instrument, sealed and subscribed by him/her to be his/her own free act and deed and made with full knowledge of its significance.

Before Me, _____
Notary Public