

Kent Police Explorer Application Packet

General Membership Requirements

1. Applicants must be between the ages of 14 (and out of the eighth grade), and 21 years at age.
2. Parental approval must be obtained.
3. School transcripts demonstrating a 2.0 grade point average, or better, must be enclosed with the application.
4. The applicant must be in good health and without physical condition(s) that will endanger them, or another member of the Police Department.
5. The applicant must be of good character and possess good moral habits. Driving records will be considered.
6. All appointees must complete the Washington State Law Enforcement Explorer Academy within the first 12 months of membership, subject to advisor approval.
7. All applicants who are accepted must attend four consecutive meetings, and within four weeks of that having been completed must possess a Kent Police Explorer uniform.
8. Upon appointment to the Post, a mandatory six months probation period must be served.
9. All applicants must successfully pass a background investigation including, but not limited to, a criminal history records check.
10. None of the above requirements is intended to be an automatic disqualifier. All of the above are taken into consideration when considering an applicant. If you feel that there are special circumstances that should be considered when applying, contact the Explorer Coordinator.

When filling out the attached application:

- Fill in all of the blanks. If an item does not apply to you put in N/A.
- Give complete information, including your first, middle, and last names completely spelled out.
- Submit only information you are sure of.
- Be sure that you and/or your parents sign the forms in the appropriate places.
- INTENTIONAL WITHHOLDING OF INFORMATION OR FALSEIFICATION OF INFORMATION ON THIS APPLICATION WILL RESULT IN IMMEDIATE DENIAL OF ACCEPTANCE. If the applicant is accepted and falsification is discovered, the Explorer will be dismissed without recourse.

Application Form

Name: _____ DOB: _____

Address: _____ State: _____ Zip: _____

Home phone: _____ Work phone: _____

School attending: _____

Parents/Guardians name: _____

Parents/Guardians address: _____

Parents/Guardians home phone: _____ Work: _____

Are you employed? _____ Where? _____

Average hours of work per week? _____

Career interests: _____

Previous training: _____

Do you have a valid driver's license? _____ If "YES", for how long? _____

List any traffic violations you have received? _____ Use additional paper if necessary

Have you ever been arrested for a crime? _____ If "YES", what and when?

Have you ever been convicted of a crime? _____ If "YES", what and when?

Have you ever used drugs? _____ If "YES", what and when?

Have you ever been suspended from school? _____ If "YES", when and why?

How many days absent / tardy last semester / quarter? _____

What is your current GPA when you last attended school? _____

Adult references:

Name: _____ phone number _____

Name: _____ phone number _____

Name: _____ phone number _____

I hereby apply for the position of Kent Police Explorer. I further consent and authorize the Police Department to conduct a background check including, but not limited to, a juvenile and criminal history records check.

Waiver of Liability, Release of Claims, and Indemnification

As consideration for being a member of the Kent Police Explorers and thereby being permitted to engage in Kent Police Explorer activities which further my or my child's education and knowledge of police activities;

I, the undersigned, hereby agree to indemnify and hold harmless the City of Kent, its officials, officers, employees, agents, and volunteers harmless from any and all claims, injuries, or damages of any nature, sustained to my person or property which occur as a result of or during my, or my child's accompanying members of the Kent Police Department during their official duties, or during Kent Police explorer activities.

I further release and waive any an all claims and causes of action, including but not limited to actions based on negligence, which may arise against the City of Kent, its officials, officers, employees, agents and volunteers, as a result of any injury to my or my child's person or property which occur as a result of or during my or my child's accompanying members of the Kent Police Department during their official duties, or while engaging in any Kent Police Explorer activity.

I further agree for myself, my heirs, executors, administrators, and assigns, to defend and indemnify the City of Kent, it officials, officers, employees, agents and volunteers, their sureties against any and all actions, suits, debts, claims, demands, damages, liability, or expenses of any kind incurred or arising by reason of any actual or claimed negligence or wrongful act or omission of mine or my child's while accompanying any City of Kent official, officer, employee, agent, and volunteer, or while engaging in any Kent Police Explorer activity.

All parties signing below endorse the preceding three paragraphs as their own and represent that the waiver of liability, release of claims, and indemnification is entered into a knowing and intelligent manner and pursuant to his or her free will.

APPLICANT'S SIGNATURE: _____

SIGNED THIS _____ DAY OF _____, _____

WITNESSED: _____

PARENT'S SIGNATURE: _____

PARENT'S SIGNATURE: _____

Statement of Understanding

I HEREBY REPRESENT THAT I HAVE CAREFULLY READ AND UNDERSTAND THE CONTENTS OF THIS DOCUMENT CONSISTING OF GENERAL MEMBER REQUIREMENTS, WAIVER OF LIABILITY, APPLICATION, AND HOLD HARMLESS AGREEMENT, AND UNDERSTAND THE CONTENTS OF THESE DOCUMENTS AND SIGN SAME OF MY OWN FREE WILL.

EXECUTED AT _____, ON THIS _____ DAY OF _____, _____

SIGNATURE OF STUDENT MEMBER: _____

ADDRESS: _____

PARENTS INITIALS _____

AS PARENT OR GUARDIAN OF _____, I HAVE READ THE ATTACHED FORMS AS NOTED ABOVE AND AGREE TO ALL OF THE TERMS CONTAINED THEREIN.

SIGNATURE OF PARENT OR GUARDIAN _____

HOME PHONE (_____) _____ WORK PHONE (_____) _____

DATED _____

NOTARY: Subscribed and sworn before me this _____ day of _____.

Notary in an for the Sate of Washington _____,

Residing in _____.

Kent Police Department Hold Harmless Agreement

In consideration of the City of Kent granting the undersigned the opportunity to accompany an employee of the Kent Police Department in the performance of said employee's duties by riding with said employee in a city owned vehicle: and the undersigned, recognizing the fact that the duties of the officers of the city are inherently dangerous and that no duty is owed to the passenger while such employee is engaged in his or her official duties, hereby assumes all risks attendant upon such activity and agrees to hold the City of Kent, its officials, officers, employees, agents, and volunteers harmless from any and all claims which may arise as a result of the undersigned's accompanying said employee of the City of Kent.

I have read the above and yet desiring to accompany an employee of the Kent Police Department, have agreed on this _____ day of _____.

Signature: _____

Print name: _____ Address: _____

City: _____, WA.

Date of Birth: _____ Phone: (_____) _____

THE REMANDER OF THIS FORM MUST BE COMPLETED BY A PARENT OR GUARDIAN OF ANY PERSON WHO IS UNDER EIGHTEEN (18) YEARS OF AGE, OR WHO IS APPLYING TO BECOME A KENT POLICE EXPLORER.

I, _____, the parent or legal guardian of the above names minor, (or Explorer Applicant), have read this hold harmless agreement and hereby consent to the minor/applicant accompanying a City of Kent employee by riding with the employee in a city owned vehicle and knowing of the risks involved and assuming same, hereby agree to hold the City of Kent and its officials, officers, employees, agents, and volunteers harmless from any and all claims which may arise as a result of the above minor/applicant accompanying said employee of the City of Kent.

Signature: _____

Address: _____

City: _____, State: _____ Zip: _____

Phone: (_____) _____

WACIC/NCIC check

Date / specialist: _____