

**City of Warren Police Dept.**  
**Citizen's Police Awareness Academy**



**A Partnership with  
Citizens, Neighborhoods, Communities &  
Warren's initiative for Neighborhood safety**

***"Protect & Serve"***

# The Citizen Police Awareness Academy

As Warren moves towards implementing community initiatives, the Warren Police Department **Citizen's Police Awareness Academy**, will provide community members with an inside look at local law enforcement. During the academy the participants will be introduced to our Police Services that include Patrol and Traffic Divisions, Detective, Juvenile and Family Investigation Divisions, Special Investigative Divisions, such as drug enforcement, crime lab, Trumbull County Jail, and much more.

The academy is a **Free SIX** (6) week course. It is designed to give an overview of our department's policies and procedures. The curriculum and teaching methods are similar to the traditional police academy, but the weekly sessions **are not** designed to certify the participant(s) as a police officer.

Participants will have the opportunity to meet with the Chief of Police and his staff members. The academy will also provide a forum for the participants to offer suggestions and provide input regarding the general operations of the department. Those attending will be encouraged to ask questions and express their concerns to police employees. The Warren Police Department hopes to create a greater awareness and understanding of law enforcement's role in the community through the education provided by the **Citizen Police Awareness Academy**.

## Requirements:

- All participants must be 18 years, under 18 with parental consent.
- Residents of Warren will have priority on seats vs non-residence
- All participants must have a background check,
- All participants must sign the enclosed liability waiver.
- Local records and criminal history will be checked, as will outstanding warrant and driving histories.

## Academy Schedule:

Classes will meet one (1) day a week for SIX (6) weeks (you will be notified by WPD of the start date of the classes).

All classes will be held from 6:00pm until 9:00pm at the Warren Police Department, 141 South St, Warren, Ohio 44483.

The training will be held in the Roll Call Room of police station and access can be gained through the ramp entrance on the north side of the station.

The academy will culminate with a graduation ceremony upon completion of the program.

## How to Apply:

Pick-up, complete, and mail or drop off the appropriate application to:

Ptl. Brian E. Crites/4647

Warren Police Department

141 South St

Warren, Ohio 44481

between the hours of

9:00am – 3:00pm Mondays thru Fridays.

- Note: Applications will be taken on an ongoing basis for future classes. The first fifteen citizens who meet the requirements will be notified for the first class. The remaining citizens will be notified of additional classes later in the year.

# Warren Police Department

## Citizen Police Awareness Academy Application

Citizen  Business  Youth

Name: \_\_\_\_\_

(Last)

(First)

(Middle)

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Employer/School: \_\_\_\_\_ Position/Grade: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ S.S.N. or OLN \_\_\_\_\_

Email : \_\_\_\_\_ Shirt Size: \_\_\_\_\_

What contacts have you had with the police? \_\_\_\_\_

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Education: High School  Assoc. Degree  Bachelor's Degree   
Advanced Degree  Other/School/Training

Class space is limited to **15** participants. Please mail or drop off completed applications to:

Warren Police Department

Ptl. Brian E. Crites/4647

141 South St SE

Warren, Ohio 44483

(330) 841-2512 between the hours of 8am. to 3 pm. Monday thru Friday.

# Warren Police Liability Form

I, \_\_\_\_\_ have volunteered to be a participant in the Warren Police Citizen Police Awareness Academy. In consideration for allowing me to a participant, I agree to the conditions contained herein. I understand that the sole purpose of the Warren Police Citizen Police Awareness Academy is to provide me with information relating to the Warren Police Department specifically, and law enforcement in general. I have been instructed and understand that as a participant and a graduate of the Warren Police Citizen Police Awareness Academy that:

1. I do NOT and WILL NOT have police powers of any kind.
2. I am NOT, nor will I be, a police officer by virtue of participation in, and/or graduation from the Warren Police Citizen Police Awareness Academy .
3. I will NOT represent myself as a police officer at any time to any person(s).
4. Should I violate any laws (local, state or federal), I understand that I will NOT receive any special treatment or consideration because I am a participant, or graduate of the Warren Police Citizen Police Awareness Academy.
5. Based on my participation in the Warren Police Citizen Police Awareness Academy , I understand that I am, specifically NOT authorized by the Police Department to carry or use any weapons or firearms.

I hereby release and forego any and all claims of any kind against the Warren Weed & Seed Program, Youngstown State University, the US Department of Justice, the City of Warren, and the Warren Police Department, as well as, its agents, officers, employees, and the political subdivision employing them, from any kind and all liability for any injury or loss of any kind that may result from my participation in the Warren Police Citizen Police Awareness Academy .

The Warren Police Department reserves the right to expel any participant from the Warren Police Citizen Police Awareness Academy during the course and, after graduation, to deprive any alumnus of the Warren Police Citizen Police Awareness Academy certificate awarded if that person is found to be engaging in any actions which may be considered to bring disgrace on the Warren Police Citizen Police Awareness Academy , Warren Weed & Seed Program, Youngstown State University, the US Department of Justice, the City of Warren, and the Warren Police Department. Finally, I hereby acknowledge that I have read and understand this agreement, and sign it freely and voluntarily.

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Name: \_\_\_\_\_ Date: \_\_\_\_\_

Legal guardian: \_\_\_\_\_ Date: \_\_\_\_\_