



Statement of Completion of Background Investigation for Level I & II Academy

Vermont Criminal Justice Training Council
Vermont Police Academy
317 Academy Road, Pittsford, VT 05763
Tel: (802) 483-6228 Fax: (802) 483-2343 www.vcjtc.vermont.gov

Employing Agency: _____

APPLICANT NAME: _____ **DOB:** ____ / ____ / ____
 First **Last** **Middle I.**

TO BE READ AND SIGNED BY EMPLOYING AGENCY HEAD

The applicant has successfully passed a thorough, comprehensive background and character check, which includes FBI fingerprint submission and polygraph exam. The polygraph must have been administered on behalf of the hiring agency or another Vermont police agency within two years of entry into Basic Training.

Date of Fingerprinting: _____

Date of Polygraph: _____

I have attached a complete VCJTC MEDICAL EXAMINATION form, completed no more than 6 months prior to entry in to the Academy by a licensed physician, physician's assistant or nurse practitioner.

I certify that the applicant named above meets the minimum entry standards for the Vermont Police Academy's Basic Training program for Level-I & II Law Enforcement Officers in accordance with the Vermont Criminal Justice Training Council Rule 17. The applicant has been or will be was hired on ____ / ____ / ____ and will be appointed as a Level-I or II Law Enforcement Officer with an effective date of ____ / ____ / ____.

ATTEST: _____
 Signature of Agency Head or Designee Title Date

Registrant: Release of Liability

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 a student of the Vermont Police Academy do hereby waive, release, and hold harmless the State of Vermont, the Vermont 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, physical or mental 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 firearms class 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 Registrant

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 (exp: _____)

Law Enforcement Agencies and Towns: Release of Liability

In consideration of the training to be received by its applicant, 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 Vermont 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 registrant during the above-referenced Vermont Police Academy 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.

I hereby certify that the above-named individual is, or will be, upon satisfactory completion of the Level I & II basic training course, appointed as a Level I or II enforcement officer.

Signature of Agency Head or Designee 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 (exp: _____)