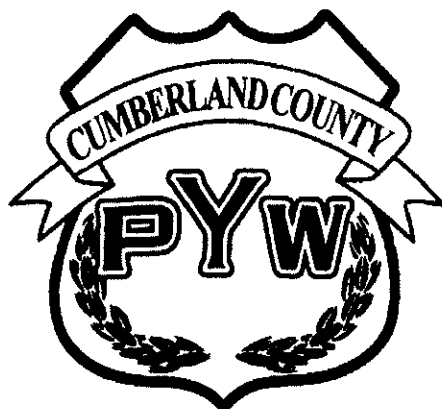


Cumberland County

2016

# POLICE YOUTH WEEK

## Application Packet



CADET: \_\_\_\_\_

*Last Name, First Name*

Sheriff's Office

**SPONSORING ORGANIZATION:**

Vineland Police

Bridgeton Police

Millville Police

SHIRT SIZE: S  M  L  XL  XXL

SHORTS SIZE: S  M  L  XL  XXL

Prosecutors Office



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Basic Information Form for **Police Youth Week 2016**  
This document will be retained by the PYW Staff

CADET: \_\_\_\_\_  
*Last Name, First Name*

DATE \_\_\_\_\_

NAME OF CADET \_\_\_\_\_

ADDRESS \_\_\_\_\_

AGE \_\_\_\_\_ Male/Female \_\_\_\_\_ Social Security # \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

HOME TELEPHONE NUMBER \_\_\_\_\_

PARENT/GUARDIAN NAME \_\_\_\_\_

PARENT/GUARDIAN **24 Hr.** CELL NUMBER \_\_\_\_\_

PARENT/GUARDIAN WORK NUMBER \_\_\_\_\_

ALTERNATE CONTACT(S) \_\_\_\_\_

ALTERNATE CONTACT(S) PHONE NUMBERS \_\_\_\_\_

INSURANCE COMPANY \_\_\_\_\_

POLICY NUMBER \_\_\_\_\_

DRUG ALLERGIES \_\_\_\_\_

FOOD ALLERGIES \_\_\_\_\_

PAST MEDICAL CONDITIONS \_\_\_\_\_

CURRENT MEDICAL CONDITIONS \_\_\_\_\_

ASTHMA YES  NO

## Permission Slip for Police Youth Week 2016

This document will be retained by the PYW Staff

### Student Information

Name: \_\_\_\_\_  
Last First MI

Address:

Street

City

State

Zip

Phone #:( ) \_\_\_\_\_ Email Address: \_\_\_\_\_

Sex:  Male  Female Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

### Parent / Guardian Information

Name: \_\_\_\_\_  
Last First MI

Address:

Street

City

State

Zip

Phone #:( ) \_\_\_\_\_ Email Address: \_\_\_\_\_

Emergency 24 Hour Phone #: ( ) \_\_\_\_\_

Upon reviewing all of the provided information and completed forms, \_\_\_\_\_  
*Cadet's Name*

Has my permission to attend the Police Youth Week (PYW) Program conducted by the Cumberland County Sheriff's Office at Holly Heights School in Millville, NJ and any off site location to be used for Police Youth Week activities or classes.

Included in the above mentioned off site activity would be Swimming for the Cadet's at the Holly City Swim Club, located at 501 S. Wade Boulevard, Millville, NJ. **Permission to Swim Yes**  **No**

Please Check One:  My child **KNOWS** how to swim  My child **DOES NOT KNOW** how to swim

\_\_\_\_\_  
Parent / Guardian (Print Full Name)

\_\_\_\_\_  
Parent /Guardian Signature

\_\_\_\_\_  
Date

**Cadet Waiver and Release Form for Police Youth Week 2016**

This document will be retained by the PYW Staff

CADET: \_\_\_\_\_  
*Last Name, First Name*

In consideration of the Cumberland County Sheriff's Office allowing me to participate in the Police Youth Week Program (PYW) at Holly Heights School and other off campus sites, I, the undersigned, for myself, my heirs, executors, administrators and assigns, hereby waive and release any and all claims for damages or loss to my person and/or property that may be caused by any act, or failure to act, of the Cumberland County Sheriff's Office, its officers, officers from any law enforcement departments assigned, agents, employees or cadets. I assume the risk of any and all specific notice of the existence of such conditions.

My participation in the Police Youth Week Program is purely voluntary and done at my own risk. I expressly acknowledge that there is some risk in participating in law enforcement training exercises. Knowing that some risk exists, I nevertheless voluntarily assume all risks or loss, damage or injury that may be sustained while participating in these exercises even though they may arise out of the negligence of the persons or entities listed above. I agree to accept and abide by the rules and regulations as established by the Cumberland County Sheriff's Office and to obey the directions of the designated training officers.

I have read and understand the contents of this WAIVER and RELEASE and I am signing voluntarily.

**THE SIGNATURE OF A PARENT OR LEGAL GUARDIAN IS REQUIRED**

\_\_\_\_\_  
Cadet (Print Full Name)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent / Guardian (Print Full Name)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Cadet Signature

\_\_\_\_\_  
Parent / Guardian Signature

Insurance Verification Form for **Police Youth Week 2016**  
This document will be retained by the PYW Staff

CADET: \_\_\_\_\_  
*Last Name, First Name*

DATE \_\_\_\_\_

Print Name of  
Parent/Guardian \_\_\_\_\_

Relationship of  
Parent/Guardian to Child \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_

**INSURANCE COMPANY** \_\_\_\_\_

**POLICY#** \_\_\_\_\_

**A Copy of your child's Insurance Card is needed and must be turned in with the application.**

Disclaimer: The Cumberland County Sheriff's Department or any of the Law Enforcement Agencies associated with this program will not be responsible for any payment of medical or physician bills incurred to attend or during Police Youth Week.

Medical Authorization Form for **Police Youth Week 2016**

This document will be retained by the PYW Staff

CADET: \_\_\_\_\_

*Last Name, First Name*

A. Explain **any existing** medical conditions the Cadet may have:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

B. List any medications (both over-the-counter and prescription) to be taken during the program.

<u>Medication</u>	<u>Dosage/Time Taken</u>	<u>Special Instructions</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

- *Add additional information on the back of this form if necessary.*

C. List / Explain any allergies or nutritional requirements.

1. \_\_\_\_\_
2. \_\_\_\_\_

Prior to the Cadet's arrival, all medications are to be labeled and stored in their original container or prescription container, as applicable, and in accordance with manufacturer or pharmacy instructions. The Cadet will provide six full days' supply of medication only.

***FAILURE TO COMPLY WITH THIS WILL PREVENT THE CADET FROM PARTICIPATING IN PYW.***

The signed Parent/Guardian of \_\_\_\_\_ give permission to the staff of the 2016 PYW the authority to seek/ provide necessary medical care treatment to their child during PYW. In case of an emergency, the child will be treated as soon as possible, should I not be able to be contacted.

In case of an emergency, contact: \_\_\_\_\_

Relationship: \_\_\_\_\_ 24 Hour Phone #: \_\_\_\_\_

\_\_\_\_\_  
Cadet (Print Full Name)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent / Guardian (Print Full Name)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Cadet Signature

\_\_\_\_\_  
Parent / Guardian Signature





## Medical Medication Form for Police Youth Week 2016

This document will be retained by the PYW Staff

CADET: \_\_\_\_\_  
*Last Name, First Name*

No medication will be administered by Police Youth Week Staff (PYW) or its agents until the consent forms are completed and on file. Medication authorization and administration forms will be kept and stored confidentially as required. *Each medication requires a separate authorization form.*

**For Nonprescription Medications:** Parent/Guardian written authorization is required.

**For Prescription Medications:** Parent/Guardian and Practitioner written authorization are required.

All medication must be in the original container labeled with the cadet's name, correct dosage, time and quantity to be given. All prescription medication must be in the original container labeled from the pharmacy. All medication will be kept in a securely locked cabinet or storage area only accessible to those who have been given the authority to administer medications to the cadet's.

Parents/Guardians are responsible for bringing medications to the cadet's pick-up location and picking up any unused medication at their graduation ceremony. PYW staff will not cut tablets so this must be done at home or by the pharmacy. Also non-FDA approved drugs (Herbal Medication) is not allowed unless physician approval is obtained in advanced.

I hereby give permission for personnel designated by the Police Youth Week Staff to give medication to my child according to the directions stated. I also authorize PYW Staff in medication administration to contact the cadet's practitioner or me if there is a question regarding medication administration. I understand that any unused medication will be properly disposed of within ten days if not claimed by Parent/Guardian, no medication will be sent home with the cadet. I agree to hold the Cumberland County Sheriff's Office and the PYW Staff harmless in any and all claims arising from the administration of this medication at Police Youth Week.

\_\_\_\_\_  
Parent / Guardian (Print Full Name)

\_\_\_\_\_  
Parent / Guardian Signature

\_\_\_\_\_  
Date

24 Hour Phone #: \_\_\_\_\_

*Disclaimer: The Cumberland County Sheriff's Department or any of the Law Enforcement Agencies associated with this program will not be responsible for any payment of medical or physician bills incurred to attend or during Police Youth Week.*

Physician Acknowledge Medication Form for **Police Youth Week 2016**  
This document will be retained by the PYW Staff

CADET: \_\_\_\_\_  
*Last Name, First Name*

*Please use one sheet for each medication that will be administered at Police Youth Week.*

I acknowledge by my signature on this document that I will assist and advise designated Police Youth Week (PYW) Staff with regard to the administration of medication described below, which includes accepting direct communication. I further acknowledge that all instructions should be stated in language of the lay person. I further understand that if the cadet is allowed to self-administer medications that proper instruction has been given.

Diagnosis/Reason for Medication: \_\_\_\_\_

Medication: \_\_\_\_\_ Dose: \_\_\_\_\_

Route/ Mode of Administration: \_\_\_\_\_ Frequency: \_\_\_\_\_

Times to be given: \_\_\_\_\_ Start Date: \_\_\_\_\_ Stop Date: \_\_\_\_\_

Special Instructions for Administration: \_\_\_\_\_

Potential Adverse Reactions: \_\_\_\_\_  
*(If noted, PYW Staff should contact parent/guardian/ or physician)*

Student *May* \_\_\_\_\_ or *May Not* \_\_\_\_\_ carry and/or self-administer medications at PYW

Practitioner Address

Name/Office: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Phone#: \_\_\_\_\_

\_\_\_\_\_  
Practitioner (Print Full Name)

\_\_\_\_\_  
Practitioner Signature

\_\_\_\_\_  
Date

*Disclaimer: The Cumberland County Sheriff's Department or any of the Law Enforcement Agencies associated with this program will not be responsible for any payment of medical or physician bills incurred to attend or during Police Youth Week.*

Cadet Food Allergy Form for **Police Youth Week 2016**

This document will be retained by the PYW Staff

CADET: \_\_\_\_\_  
Last Name, First Name

ADDRESS: \_\_\_\_\_

CITY, STATE: \_\_\_\_\_

24 HR TELEPHONE #: \_\_\_\_\_

**\*\*\*Does your Child have a Food Allergy\*\*\***

YES

NO

Types of Food (Select all that apply)

Milk

Nuts

Peanuts

Shellfish

Eggs

Lactose Intolerant

Vegetarian

Gluten Intolerant

Religious Menu

Other

Please List any other food allergies \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Parent / Guardian (Print Full Name)

\_\_\_\_\_  
Parent / Guardian Signature

\_\_\_\_\_  
Date

Dear Parent/Guardian

My name is Master Chief Sherman Taylor and I am part of the Mess Hall staff that will be preparing and serving your child at PYW this year. As in years past, myself and Master Chief Norman Franckle are looking forward to serving your child and hoping he or she will enjoy their week at PYW.

So that your child has a safe and enjoyable menu experience, we ask that you fill out the attached form to let us know if your child has any type of food allergy. The information that is provided is only used by PYW Mess Hall Staff and will not be shared with any agency other than the medical personnel if the need arises.

Please be assured that we will make every attempt to provide an alternative menu for your child's specific allergy, intolerance, or religious belief. We understand that in today's society, there are certain religious beliefs that have certain dietary restrictions and we at PYW will abide by those to the best of our ability.

Please understand that any allergy, religious affiliation, or medical intolerance is different from your child not "Liking" certain foods. If your child does not eat certain foods, this does not fit into the category. We at camp encourage the children attending to try the food we make and if they do not like it, there will be a substitution.

The Master Chiefs that are in charge of the Mess Hall at PYW pride themselves with providing nutritious, home cooked meals that your child will love! They will be provided with three meals daily and in the past we have been approached by parents that have asked "How did you get my child to eat that?" Parents have also called and asked for recipes and have been amazed that their child now asked for certain foods at home. I can personally guarantee that while at Police Youth Week, **NO CHILD WILL LEAVE MY MESS HALL HUNGRY!!!**

Again, I would like to thank you for your cooperation and look forward to serving your child at Police Youth Week.

*Sherman Taylor*

Master Chief Sherman Taylor  
PYW Senior Chef

# Photograph & Audio Visual Release Form for Police Youth Week 2016

This document will be retained by the PYW Staff

CADET: \_\_\_\_\_  
*Last Name, First Name*

The Cumberland County Sheriff's Office requests your permission to reproduce through printed, audio, visual or electronic means activities in which your child has participated in at the Police Youth Week Program. Your authorization will allow us to use the photographs and video footage taken during the week to promote the program through the use of mass media, displays, brochures, websites etc.

- I, as a parent or guardian of the below listed Cadet, fully authorize and grant the Cumberland County Sheriff's Office and authorized representatives from PYW the right to print, photograph, record, and edit as desired, the name, image, likeness, and/or voice of the below Cadet on audio, video, film, slide, or any other electronic and printed format currently developed for the purpose stated or related to the above.
- I understand and agree that the use of such photographs and video will be without compensation to the Cadet or the Cadet's parent or guardian.
- I understand all Photos/Videos will be the property of the Cumberland County Sheriff's Office and authorized representatives from PYW. Photos/Videos may be used without specific notification.
- I understand and agree that the Cumberland County Sheriff's Office and authorized representatives from PYW shall have the exclusive right, title, and interest, including copyrights, of such photographs and video recordings.
- I understand and agree that the Cumberland County Sheriff's Office and authorized representatives from PYW shall have the unlimited right to use the photographs or videos for any purpose stated or related to the above.
- I hereby release and hold harmless the Cumberland County Sheriff's Office and authorized representatives from PYW from all actions, claims, damages, costs, or expenses, including attorney's fees, brought by the Cadet and/or parent or guardian which relate to or rise out of any use of these photographs or videos as specified above.
- The Cumberland County Sheriff's Office and authorized representatives from PYW will not release any personally identifiable information without prior consent of the Cadet's parent or guardian.

I have read and understand the contents of this Photograph & Audio Visual Release Form and I am signing voluntarily.

\_\_\_\_\_  
Cadet (Print Full Name)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent / Guardian (Print Full Name)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Cadet Signature

\_\_\_\_\_  
Parent / Guardian Signature

## Procedures & Regulations for Police Youth Week 2016

This document will be retained by the PYW Staff

### 1. Discipline

Int: \_\_\_\_\_

- A. Discipline is a fundamental requirement of the Police Youth Week, requiring exact, prompt and willing adherence to any lawful order.
- B. The highest standard of discipline is required of all cadets. This involves self-control and a sense of personal responsibility, beyond mere obedience of the threat of punishment.
- C. Any major violations of Rules and Regulations may be cause for dismissal from the program.

### 2. General Provisions

Int: \_\_\_\_\_

- A. Adherence to Rules and Regulations, Orders and Instructions
  - 1. All cadets, while in training, are required to observe the Rules and Regulations, Staff orders and instructions, whether verbal or written. Any cadet violating any of these provisions may be subject to disciplinary action or dismissal.
  - 2. Cadets will:
    - a. Obey orders issued by any Police Youth Week staff placed by competent authority in a position of supervision. If an order conflicts with a previously issued order, the cadet should respectfully call attention to this. The last order given will stand and the cadet obeying this order will not be disciplined.
    - b. All cadets are to report any illness or injury to a PYW Staff member immediately.
- B. Leave of Absence
  - 1. Unauthorized absence or leaving the prescribed limits will not be tolerated.
- C. Cadets **MUST** report to a PYW Staff member prior to leaving the grounds if they decide to withdraw from Police Youth Week.
- D. All PYW Grounds and buildings are **OFF Limits** to Cadets, unless otherwise directed to or authorized by PYW Staff.
- E. Audio recording, or audio listening devices of any kind, including, but not limited to, video cameras, MP3 Players, radios, tablets and cellular phones are **NOT PERMITTED** during Police Youth Week.

3. Performance Of Duties

Int: \_\_\_\_\_

- A. Cadets will be held responsible for the proper performance of assigned duties.
- B. Cadets will not perform their assignments in an inefficient manner.
- C. Cadets will advise any PYW staff of any crimes, fires, accidents, misconduct, illness, injury, complaints and misconduct immediately. Cadets will not withhold any information on these matters for any reason.
- D. Cadets will be punctual in attendance, where time is specified.
- E. Cadets will not make false or misleading reports or knowingly enter or cause to be entered in any records, any inaccurate, false, improper, or misleading information.

4. Professional Conduct

Int: \_\_\_\_\_

A. Cadets will not:

- 1. Threaten, assault, bully, strike or direct any insulting language toward any other cadet or member of the PYW Staff.
- 2. Behave in an insubordinate or disrespectful manner toward any other cadet placed in a position of authority.
- 3. Neglect, suffer to be lost, spoiled, damaged, wrongfully disposed of property or clothing assigned to them for training.

B. Cadets will not:

- 1. Act or behave in such a manner so as to discredit themselves or bring discredit to Police Youth Week and its members.
- 2. Act or behave in any capacity that would cause detriment of the good order and discipline of the program.

C. Cadets will not:

- 1. Use harsh, coarse, profane, indecent, suggestive, sarcastic or insulting language.
- 2. Criticize, ridicule, haze, humiliate, harass, bully, or discriminate against any other person.

D. Cadets Will:

- 1. Be quiet, civil and orderly; maintain order, control of temper, patience and discretion at all times.
- 2. Answer all questions politely and with a sir and ma'am.
- 3. Will have, and show a positive attitude at all times.

E. Cadets while attending Police Youth Week, will not fraternize with any member of the Law Enforcement and/or assigned civilian staff.

F. Cadets Will:

1. Not cheat, plagiarize or use other fraudulent means to meet training requirements.
2. Cadets will not have sexual contact with other cadets assigned to Police Youth Week.

5. Alcohol, Drugs, and Weapons

Int: \_\_\_\_\_

A. Alcohol

1. Cadets will not bring or permit to be brought onto PYW grounds any alcoholic beverage.
2. Cadets will not consume any alcoholic beverages.

B. Drugs

1. Cadets will not possess or use any illegal drug, controlled dangerous substance at any time.
2. Any use of a prescription legend drug, prescribed for use during the training program, must be reported to the PYW Staff or EMT immediately.
3. All prescription drugs must be kept in properly marked containers as instructed by staff upon reported to training.
4. Abuse of any legally obtained drug or medicine is prohibited.

C. Weapons

1. Cadets while on PYW Grounds, will not have in their possession any weapons or firearms.

6. Military Bearing and Courtesy Requirements

Int: \_\_\_\_\_

- A. Use the word "Sir" and "Ma'am" on appropriate occasions
- B. Use the proper salutation, when addressing or being addressed by personnel in authority.
- C. Assume the position of attention (sitting or standing), when properly commanded.
- D. Call the class to attention whenever the situation warrants it.
- E. Salute when required. Only commissioned officers warrant a hand salute.
- F. Remove cap, when indoors.
- G. Follow proper procedures when reporting to staff or a commissioned officer.



- H. Address each other properly.
- I. Maintain good posture at all times.
- J. Make way for authorized persons.

7. Formations

Int: \_\_\_\_\_

- A. Assemble as assigned by Lead Drill Instructor.
- B. Line up as assigned by Lead Drill Instructor.
- C. When walking alone cadets will walk swiftly to their destination, no running.
- D. When walking with two or more cadets they will march in step.
- E. All formations will march to designated areas.
- F. Platoon or squad leaders will account for absent or late cadets.
- G. Cadets will not be absent from formations without approval from the Staff or EMT's.
- H. Cadets will not leave ranks without permission.
- I. Cadets will not talk or act up while in formation.
- J. During bad weather the group will follow directions from the Lead Drill Instructor.

8. Living Quarters

Int: \_\_\_\_\_

- A. Use only the designated toilet facilities for personal comfort, grooming, bathing.
- B. Cadets will not sit, lie down or have any articles on bunk, except during authorized times.
- C. Bed Lines will be taut and kept clean.
- D. Only authorized articles are permitted in the living quarters. No food/snacks shall be stored or saved overnight.
- E. All authorized issued items will be properly aligned.
- F. No unauthorized person(s) or food is permitted in the living quarters.
- G. Bunk assignment will not be changed without authorization.
- H. Every cadet is responsible to clean the area surrounding his/her bunk.
- I. Soiled laundry will be stored as directed by PYW Staff.
- J. Inspection of the living/sleeping quarters will be conducted daily. All areas will be ready for immediate inspection at all times.

9. Classroom Procedures

Int: \_\_\_\_\_

- A. Break periods will be given by the instructor or staff.
- B. Raise your hand to make an inquiry of the instructor.
- C. Stay off of the stage unless directed by an instructor.
- D. Clothing or equipment will not be left in the classroom.
- E. No food is permitted in the classroom unless directed by the instructor or staff.
- F. Cadets will pay attention to instructor and the course of instruction.
- G. At the end of each course of instruction, appreciations will be shown by applause.
- H. The Lead Drill Instructor will provide training on how to arrive and leave the classroom.
- I. Breaks will be taking in designated areas.
- J. Erase or white boards will be cleaned after each class, unless instructed otherwise.

10. Mess Hall Procedure

Int: \_\_\_\_\_

- A. Entering – uncover and tuck cap in rear of belt.
- B. Seating - fill entire table before sitting at another table.
- C. Stand at attention while holding your tray until all seats are accounted for, then sit as a group.
- D. Conversations will be at the will of the staff and you will be instructed.
- E. Table manners are a must,
- F. There will be no conversation with mess hall personnel, except requests for food, utensils, etc. (Use Sir / Ma'am).
- G. Cadets will return his/her tray, utensils, etc. to the designated disposal area.
- H. Exit according to instruction.

11. Laundry and Luggage

Int: \_\_\_\_\_

- A. All clothing and towels will be placed according to instruction.
- B. One piece of luggage will be allowed and placed according to instruction.

12. Telephones    ***NO CELLULAR PHONES ALLOWED!!!***

Int: \_\_\_\_\_

13. Responsibilities of the Platoon Leader

Int: \_\_\_\_\_

- A. Direct mass movements when instructed
- B. Ensure proper military bearing of the platoon
- C. Report to the Lead Drill Instructor the roll call, sick and any issues that need attention.

14. Squad Leaders

Int: \_\_\_\_\_

- A. One cadet per squad will be designated as the leader.
- B. Responsibilities of the Squad Leader:
  - 1. Punctuality of their squad for formation.
  - 2. Military bearing for their squad.
  - 3. Assignment of duties regarding details assigned by staff.
  - 4. Return of any issued equipment to squad.
  - 5. Proper uniform of the day.
  - 6. Report any unusual incidents or problems to staff or Lead Drill Instructor.

15. Procedures for Sick Call

Int: \_\_\_\_\_

- A. Cadets feeling ill or sustaining an injury will report immediately to the Lead Drill Instructor.
- B. Every morning, prior to roll call, both Platoon & Squad Leaders will ascertain if any cadets are sick or injured.
- C. If necessary arrangements will be made for the cadet to see medical personnel.

16. Cleaning Details

Int: \_\_\_\_\_

- A. All cleaning details and instruction on how it is done, will be assigned upon arrival.

17. Grooming

Int: \_\_\_\_\_

A. Male Cadets

Hair shall be Neatly Trimmed, combed or brushed.

Hair shall not be more than two inches (2") in length. It shall be cut to present a tapered appearance and when combed, shall not fall over the ears or eyebrows, or extend over the shirt when standing with the head in the natural posture. Hair length or style shall not interfere with the wearing of headgear.

Fingernails shall be clipped and trimmed short. Nail polish and nail paintings are prohibited.

The wearing of earrings shall be prohibited while in uniform. Eccentric or faddish jewelry including, but not limited to, nose rings, studs, tongue rings, eyebrow rings, etc., shall be prohibited.

While in uniform, neck chains shall not be worn unless it is to identify the wearer as having a medical condition.

B. Female Cadets

Hair shall be kept clean, neatly shaped, and arranged in a professional style. When in uniform, hair shall not fall below a horizontal line level with the lower edge of the back of the collar when standing with the head in a natural posture.

Long hair, must be neatly and inconspicuously fastened, pinned or secured to the head and may not dangle free at any point. Hair length or style shall not interfere with the wearing of headgear. Long hair will be worn in a bun or similar rolled style to conform to this standard.

Cosmetics may not be applied. Exaggerated, outrageous, or faddish cosmetic styles are deemed inappropriate and shall not be worn. Long false eyelashes shall not be worn when in uniform. Brassieres that provide adequate support shall be worn.

Fingernails shall not exceed ½” measured from the fingertip, Fingernail length shall not interfere with the operation of electronic equipment or adversely affect performance. Nail polish shall not be worn.

The wearing of earrings shall be prohibited while in uniform. Eccentric or faddish jewelry including, but not limited to, nose rings, studs, tongue rings, eyebrow rings, etc., shall be prohibited.

All cadets, while at Police Youth Week, are required to observe these rules and regulations and all orders and instructions whether verbal or written. Any cadet violating any of these provisions may be subject to dismissal from the program.

If a Cadet is dismissed for a violating one of the rules and regulations, it will be the responsibility of the Parent / Guardian or other authorized person to pick up the former cadet.

While in uniform, neck chains shall not be worn unless it is to identify the wearer as having a medical condition.

\_\_\_\_\_  
Cadet (Print Full Name)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent / Guardian (Print Full Name)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Cadet Signature

\_\_\_\_\_  
Parent / Guardian Signature

## Cadet Acknowledgment Form for Police Youth Week 2016

This document will be retained by the PYW Staff

CADET: \_\_\_\_\_  
*Last Name, First Name*

We, \_\_\_\_\_ and \_\_\_\_\_  
Cadet Parent / Guardian

Who is attending/allowing to attend, the 2016 Police Youth Week Program (PYW) being held from August 15, 2016 to August 20<sup>th</sup>, 2016, acknowledge that we have received instruction regarding the following documents:

1. Rules and Regulations for PYW
2. Personal Grooming Standards for PYW
3. Procedure for Professional Conduct
4. Procedure for Performance of Duties

I/We agree to abide by these Rules and Regulations, Personal Grooming Standards, Procedure for Attitude and Demeanor Complaints and all other orders listed in the PYW application packet and information gleaned from the Mandatory PYW Meeting and realizes that failure to do so could result in removal from the Police Youth Week Program.

\_\_\_\_\_  
Cadet (Print Full Name)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent / Guardian (Print Full Name)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Cadet Signature

\_\_\_\_\_  
Parent / Guardian Signature

## Items Needed for Police Youth Week 2016

### THE FOLLOWING ITEMS SHOULD BE BROUGHT TO CAMP FOR THE WEEK:.

One Pillow	Sleepwear
One Blanket	Washcloth and Towel
One Sleeping Bag or extra blanket	Soap
One pair of jeans	Toothbrush/toothpaste
Two pair of gym shorts	Deodorant
One jacket or sweatshirt	Shampoo/Conditioner
Two pair of sneakers (not New)	Female sanitary items
Five pairs of white socks	One flashlight with batteries
One bathing suit (one piece for females)/Beach towel	Insect repellent
Underwear for the week	Sunscreen
<b>**Females will NOT go braless**</b>	flip flops (shower shoes)
<b>**FEMALES:</b> you will need to bring hair ties and bobby pins. Your hair will be pulled back in a bun at all times**	

### THE FOLLOWING ITEMS ARE PROHIBITED:

Cell phones	Photos
Portable Radios	Cameras
CD Players	Make-Up
MP3 Players/iPods	Pets
Electronic Games/devices	Jewelry
TV's	Money (Except for \$10-\$20 for Activity Day)
Computers	Weapons

**NO STUFFED ANIMALS**

**\*Bathing suits for females\* Bring an extra T-shirt of a dark color and an extra size bigger in case you need to wear that over your bathing suit.**

**\*\*\*NOTE: THE CAMP WILL PROVIDE MONOGRAMMED T-SHIRTS, SHORTS AND A HAT\*\*\***



**YOU ARE  
CORDIALLY INVITED**

**2016**

**CUMBERLAND COUNTY  
POLICE YOUTH WEEK  
GRADUATION**

**SATURDAY, AUGUST 20, 2016 AT 10:00AM**

**LAKESIDE MIDDLE SCHOOL**

**2 NORTH SHARP STREET**

**MILLVILLE, NJ 08332**

**This is a very nice ceremony and it is usually crowded.**

**It is recommended that you arrive at least**

**15 minutes early to get a seat. Please bring family and friends.**