



Sussex County Sheriff's Office

Junior Sheriff's Academy

(973) 579-0865

jracademy@sussexcountysheriff.com

Academy Overview

The Sussex County Sheriff's Office will be holding a Junior Sheriff's Academy from **July 21th – 25th 2025**. This year's Academy will be held at the Sussex County Public Safety Training Academy, 114 Morris Turnpike, Newton, NJ 07860 (across from Sussex County Main Library). Other events may change the drop off time and location. You and the recruits will be notified in advance. This is a week-long commitment. Please do not apply if you are not able to attend all five days.

Enrollment for the Academy will be limited to 40 recruits. All applicants must be County residents who will be entering the 6th, 7th or 8th grade for the 2025-2026 school year. Applications will be accepted on a first come, first serve basis. The first 40 applications received will determine who is accepted into this year's recruit class. Any applications received after the first 40 will be placed on a waiting list. If any of the first 40 applicants decide not to participate **or we have not received a recruit's medical waiver or release form by July 7, 2025**, the waiting list will then be used to fill any openings. The waiting list will also function on a first come, first serve basis.

All returned applications and attached waivers/releases must be filled out completely. **No completed applications will be accepted before May 12, 2025 or after June 19, 2025.** *Medical waiver/release forms can be submitted with the application, or they can be turned in no later than July 7, 2025. Applicants who fail to submit their medical waiver/release forms by July 7, 2025 will not be allowed to participate in the Junior Sheriff's Academy.*

Our objective is a week of education and fun through a Police Academy format. The week-long curriculum will include various presentations from Sussex County Sheriff's Officers and guest law enforcement and first responder agencies. There will be hands-on practices and physical training to give the students an idea of what is involved in becoming a Sheriff's Officer. **The Academy will culminate in a graduation ceremony on**

Friday, July 25th, 2025. Graduation will occur at the Sussex County Community College Performing Arts Center (1 College Hill, Newton, NJ).

The daily schedule is from 8:30am to 4:00pm. Recruits are to be dropped at the Sussex County Public Safety Training Academy between 8-8:20am each day, except for Graduation Day. Transportation to and from the Academy is the responsibility of the recruit's parent or guardian. There may be other day(s) in which students will be dropped off and picked up at another location. Please always be prompt when dropping off and picking up your children.

To offset the costs of the Academy, there will be a \$100 fee for each recruit. Each recruit will be issued 2 T-shirts, 2 pair of shorts, and baseball hat. They will also receive a water bottle and draw string backpack to carry their belongings throughout the Academy. This fee will be collected when the application packet is returned (payment will not be deposited until **AFTER** the enrollment closing date and recruit is accepted into the Academy). **Please do not send cash; all checks or money orders should be made out to: County of Sussex.**

Each recruit is required to bring water/sports drink and a snack. It is recommended that each recruit bring one water/sports drink to have during Physical Training and another to have throughout the day. Lunch will be provided- information will follow.

Should the recruit require medication, inhaler, or EpiPen, please enclose in a clear zip-lock bag clearly labeled with the recruit's name.

We are hopeful that the interaction that will take place between your children and the members of the Sheriff's Office will have a positive effect on all involved. As Sheriff's Officers, we thoroughly enjoy participating in this program and look forward to working with your children!

If you should have any questions regarding this program, please call Sgt. Joseph Cahill at (973) 579-0865 X2528 or email jracademy@sussexcountysheriff.com.



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Application Instruction Page

- The recruit class is limited to 40 children. The first 40 completed applications that are turned in at the Sheriff's Office will be accepted to this year's program. All other applicants will be placed onto a waiting list should any accepted recruits decide not to participate or are denied.
- All pages of the application must be filled out completely and truthfully. This includes the Application, Medical Waiver/Release and the Authorization, Release forms. Any application that contains false information or is not filled out completely will be disqualified.
- Please note that the Medical Waiver/Release requires the signature of your child's physician. If your child's physician does not sign this form, they are not eligible to participate in the Junior Sheriff's Academy.
- In order to give all applicants an equal opportunity to complete the application packet, ***no applications will be accepted before Monday, May 12, 2025.***
- All completed applications must be returned to the Sussex County Sheriff's Office in person, ***no later than Thursday, June 19, 2025.***
- When selecting the T-shirt sizes for your child, please select the appropriate size that fits your child and not the size that they would like to wear. The uniform shirt should not be baggy.
- All children who are accepted into the program will be notified by telephone/email and be provided further instructions regarding the academy and uniform ordering/pick-up.
- If you have any questions regarding the Junior Sheriff's Academy or application packet, please email: jracademy@sussexcountysheriff.com



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Application

Please fill out the following requested information completely. Also, please print all answers clearly. Any false, incomplete or illegible information may exclude the applicant from participating in the program.

Students Name: _____
(Last Name) (First Name)

Address: _____

Telephone Number: _____ Sex: (M or F) _____ Age: _____

Date of Birth: _____ School: _____

Grade (entering): _____ Height: _____ Weight: _____

You will receive an email with a link to order your child's academy uniform
Please make sure all information is legible and accurate



Primary Contact

Parent/Guardian Name: _____
(Last) (First)

Parent/Guardian Phone Number: _____
(Home) (Cell)

Email (Used to provide Junior Sheriff Academy Information): _____

Secondary Emergency Contact: _____
(Last) (First)

Secondary Emergency Contact Phone Number: _____
(Home) (Cell)

Secondary Emergency Contact Relationship to Child: _____





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Academy Rules and Regulations

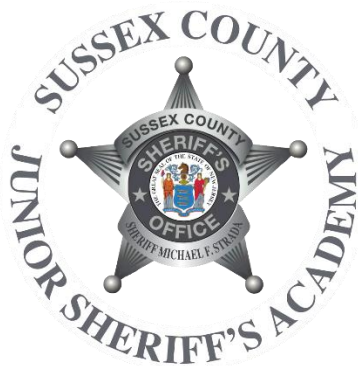
1. Recruits will maintain a professional demeanor and follow the directions of Academy Staff, as well as the Rules and Regulations of this Academy.
2. Recruits will not participate in any form of verbal harassment or physical violence towards another recruit, Academy Instructors, or visiting First Responder presenters. There is a **ZERO TOLERANCE** policy for any form of bullying, teasing, or harassing fellow recruits, Academy Instructors, and presenters.
3. Recruits will wear the academy uniform properly: T-shirt tucked in, baseball hat straight on head, and athletic/running shoes.
4. Cell phones will be turned off for the duration of the academy, except during the lunch break. For any emergencies, contact the Sheriff's Communication Center (973-579-0888), and they will notify the Academy Instructors immediately.
5. Recruits are not permitted to miss a day of the academy, except if sick or an emergent situation arises. Contact will need to be made with the Sheriff's Communication Center for notification. Provide the Telecommunicator with the recruit's name, reason, and squad assignment.
6. Recruits are required to be prompt for arrival. Multiple late arrivals will subject the recruit to dismissal from the Academy.
7. Any injuries or illnesses that occur must be reported to Academy staff immediately.
8. Electronic devices, such as iPad, iPod, Mp3 players, video games, air pods/headphones, etc. are not permitted.
9. Any act or threat of violence toward another recruit or staff member will result in immediate dismissal from the Junior Sheriff's Academy.
10. Violation of any of the Academy rules will result in dismissal.

Dress Code: This Academy has been developed to give each student the best possible learning experience. Therefore, it is necessary that students present themselves in a neat and well-groomed manner. The Junior Sheriff’s Academy will provide an academy T-shirt, shorts, and baseball cap that shall be worn to the academy classes.

Student Behavioral Contract: The purpose of this contract is to inform the above-named student that he/she must comply with all provisions of the Junior Sheriff’s Academy and to the specific terms set forth in this contract. The student understands that, due to the nature of this Academy, there will be zero tolerance rules in effect. Undesirable conduct, such as horseplay or violation of the student code of conduct, will result in immediate removal of the student from the Academy. This contract is in effect for the safety of all students and the maintenance of discipline and order. This contract represents an agreement by the students that he/she received a copy of the Rules and Regulations and the student agrees to adhere to these Rules and Regulations at all times—at home and in the Academy.

Recruit Signature _____ Date _____

Parent/Guardian Signature _____ Date _____



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Authorization and Release

The undersigned parent/guardian, understands all activities and requirements, and requests the opportunity to have my child participate in the Sussex County Sheriff's Office Junior Sheriff's Academy.

The undersigned agrees to have their child obey any and all directives or orders of any member of Sussex County Sheriff's Office while he/she is engaged in any and all activities relating to the Junior Sheriff's Academy, as well as strictly adhere to any departmental safety rules and/or regulations.

I further acknowledge that the privilege of participating in this program may be rescinded at any time during the course of the Junior Sheriff's Academy as a result of improper behavior or other factors that may be detrimental to the safety or well-being of any other participants or instructors, and the decision to rescind this privilege is in the sole and absolute discretion of the Sheriff's Officers involved.

The undersigned certifies that their son/daughter are County residents and will be **entering** the 6th or 7th or 8th grade. All of the information contained in this application is correct and truthful to the best of my knowledge. I have read the above instructions and agree to abide by these regulations; and I have signed the authorization and release of my own free will.

Parent/Guardian Name (Print): _____

Signature: _____ Date: _____

.....

The undersigned also understands that the Junior Sheriff's Academy generates interest from the news media, both print and televised, and authorizes the release of my child's name and image for use in any news media story relating to the Junior Sheriff's Academy. I also authorize the release of my child's name and image for use in any and all presentations or other media to be used for or by the Sussex County Sheriff's Office regarding this program.

Parent/Guardian Name (Print): _____

Signature: _____ Date: _____

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As a reminder, this year's recruit class will be limited to the first 40 returned and complete applications. Any applications that are not filled out completely or contain any false information may be disqualified. All applicants accepted into this year's program will be notified by telephone/email and provided further information as to when and where to pick up and order their uniforms.



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Medical Waiver/Release

Please fill out the following requested information completely. Also, please print all answers clearly. Any false, incomplete or illegible information may exclude the applicant from participating in this program.

Does your child suffer from any medical conditions: _____ If yes, please explain.

Does your child suffer from seasonal or other allergies: _____ If yes, please explain.

Does your child require any medication on a daily or emergent basis? _____ If yes, please explain.

Are there any other special needs that the staff of the Junior Sheriff's Academy should be aware of?

I, the undersigned parent/guardian of _____ states that the above health history information provided to the Sussex County Sheriff's Office is true and that my child is physically able to participate in the Junior Sheriff's Academy.

I, the undersigned parent/guardian, also hereby releases and forever discharges the County of Sussex, the Sussex County Sheriff's Office and all of its Officers, and any other agents or employees of participating agencies, from all claims and causes of action as a result of personal injuries, damages or other losses of any nature whatsoever, which may result or occur at any time while the child of the undersigned is participating in any of the activities of the Junior Sheriff's Academy. I further understand that any and all medical costs related to any injuries will be the responsibility of my family's own medical insurance company.

Parent/Guardian Name (Print): _____

(Parent/Guardian Signature)

(Date)

Please have your child's physician complete the following section.

Physician's Name: _____

Physician's Telephone Number: _____

I hereby certify that _____ is of satisfactory health and has no underlying medical conditions that would prohibit him/her from participating in physical training exercises performed during the course of the Sussex County Sheriff's Office Junior Sheriff's Academy.

(Physician's Signature)

(Date)