

# ABOUT THE COMMUNITY ACADEMY...

The Community Academy provides Community residents with an inside look at local law enforcement operations and challenges. The purpose of the Community Academy is to develop positive relations between the police and community through education. Our goal is to create a core of responsible, well-informed citizens who have the potential to influence public opinion and dispel untruths about police practices and services.

Participants in each session commit to meeting for two and a half hours one evening per week, for ten weeks, to learn about various aspects of the department. Most of the instructors will be officers and personnel from within the department, who speak on their area of expertise. Though the curriculum and teaching methods are similar to the traditional Police Academy, the Community Academy is not designed to train participants as police officers or vigilantes. After the academy, they are eligible to apply to become a member of the Volunteers in Policing "VIPs" to serve the police department and our community.

Community Academy participants come to class from a variety of backgrounds, with a variety of philosophies about police officers. Participants are encouraged to ask questions, express ideas, and offer suggestions. Class size is limited to thirty participants.

Call 540-545-4706 or email [Robert.bower@winchesterva.gov](mailto:Robert.bower@winchesterva.gov) for more information.

Mail application to: Lt. Robert Bower c/o WPD 231 E. Piccadilly St., Suite 310 Winchester, VA 22601

## COMMUNITY ACADEMY REGULATIONS

1. The Community Academy shall not interfere with the routine operations of the Police Department.
2. Participants are required to dress in proper attire (slacks and a dress shirt, blouse, etc.).
3. During a ride along with an officer, no interference with the performance of any officer shall be permitted.
4. Participants who are asked to identify themselves should explain that they are Community Academy participants.
5. Use of tobacco products is prohibited in the Public Safety Building and police vehicles.
6. Please turn cell phones/pager off or to vibrate.
7. Community Academy participants may not carry firearms while attending the Community Academy.
8. A criminal records check will be conducted on all applicants prior to admission to the academy. A criminal history may disqualify an applicant from participation.

## WINCHESTER POLICE DEPARTMENT

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*Fall 2024 Community  
Academy XXVI*

**TBD**



# Community Academy Curriculum

## Week 1 and 2

- Welcome/Introduction
- Administrative Address
- Department History
- Community Policing
- Criminal Investigations
- Patrol Division
- Tour of Police Department
- Patrol Functions/Police Paperwork
- CID/Crime Scene Processing
- Domestic Assault/Sexual Assault

## Week 3 and 4

- Defensive Tactics/Use of Force
- Crisis Intervention/Mental Health
- Drone Team/EOC
- Police Driving/Pursuits

## Week 5 and 6

- Homeless/Addiction Response
- K-9 Demo
- Dispatch/911 ECC
- Hiring Process
- Polygraph Operations

## Week 7 and 8

- Victim Witness/Court Proceedings
- Animal Control
- Volunteers in Policing
- Community Engagement

## Week 9

- Officer Survival/SWAT
- Firearms Demo

## Week 10

- Graduation and Dinner

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

Address: \_\_\_\_\_

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

Work Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

DOB: \_\_\_\_\_

Sex: \_\_\_\_\_ Height: \_\_\_\_\_ Eyes: \_\_\_\_\_

Hair: \_\_\_\_\_ Driver license #: \_\_\_\_\_

Have you ever been arrested/convicted of a crime? If so, explain. \_\_\_\_\_

Do you need special accommodations due to a disability? If so, explain. \_\_\_\_\_

In consideration of the Winchester Police Department granting permission to enter in or upon any premises which are under actual care or passive control, I hereby waive all claims to damage or loss to my person or property which may be caused by any act or failure to act of the Winchester Police Department, its officers, agents or employees. I assume the risk of all dangerous conditions in or upon the premises or vehicles and waive any and all notice of existence of such conditions. I certify that I understand the requirements and responsibilities of participants in this program.

Signature

Date

Call 540-545-4706 or email Robert.bower@winchesterva.gov for more information.

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