

# Alfred State College

## Police Academy 2026

### Registration Form – Pre-Employment Police Basic Training Course Phase One

#### CADET INFORMATION

Full Name: (please print) \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

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

Gender Identity: M: \_\_\_ F: \_\_\_ X (transgender, non-binary, or gender non-conforming): \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_

Prior Police Experience: yes/no \_\_\_\_\_ Agency (if applicable) \_\_\_\_\_

Prior Military Experience: yes/no \_\_\_\_\_ Branch (if applicable) \_\_\_\_\_

Do you or have you ever possessed certification in the following areas:

Paramedic: \_\_\_\_\_ State: \_\_\_\_\_ Certification No: \_\_\_\_\_ Exp. Date \_\_\_\_\_

EMT: \_\_\_\_\_ State: \_\_\_\_\_ Certification No: \_\_\_\_\_ Exp. Date \_\_\_\_\_

CPR: \_\_\_\_\_ State: \_\_\_\_\_ Certification No: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Do you hold any professional or trade licenses or certifications: yes/no \_\_\_\_\_

If yes, list, describe, and include expiration dates if possible.

# Alfred State College Police Academy

## CADET INFORMATION

Have you ever been arrested or had negative contact with the police? Yes/No\_\_\_ If so when and where and for what? (Include disposition of the charges)

---

---

---

---

Have you ever been involuntarily committed for mental health treatment? Yes/No\_\_\_\_\_If so when and where:

---

---

Have you ever been terminated from employment or quit to avoid being terminated? Yes/No\_\_\_If so when, where, and why:

---

---

---

Have you ever been discharged from any branch of the military under any designation other than honorable? Yes/No\_\_\_\_\_If so when and why: (you will need to submit a copy of your DD214 form with this application)

# Alfred State College Police Academy

## Academy Physical Fitness Requirements

All prospective candidates for this program should be aware that our physical fitness program consists of rigorous physical training in three required core areas: sit-ups, push-ups, and 1.5 mile run. Each of these areas require that you spend sufficient time gaining mastery of the three core exercises. In order to graduate, cadets are required to pass the Cooper Standards at a 50% or greater level, as outlined below. There will be a Physical Training test prior to the start of the academy and cadets must be at 40% of the Cooper Standards to gain entry into the academy. All cadets MUST take the PT test at Alfred State before the academy. Other PT tests results will not be accepted. Students must be at 50% of the Cooper Standards at midterm and at 50% or greater, of the Cooper Standards at the end of Phase One. There will be no exceptions to these standards.

Male	Sit-up			Push-up			1.5 Mile/Run		
Age	40%	50%	60%	40%	50%	60%	40%	50%	60%
20-29	38	40	42	29	33	37	12:29	11:58	11:27
30-39	35	36	39	24	27	30	12:53	12:25	11:49
40-49	29	31	34	18	21	24	13:50	13:05	12:25

Female	Sit-up			Push-up			1.5 Mile/Run		
Age	40%	50%	60%	40%	50%	60%	40%	50%	60%
20-29	32	35	38	15	18	21	15:05	14:15	13:25
30-39	25	27	29	11	14	15	15:56	15:14	14:33
40-49	20	22	24	9	11	13	17:11	16:13	15:17

It is extremely important that each of you be familiar with your own current physical condition to include overall weight, body fat, flexibility, and upper and lower body strength. These factors may influence your performance when being tested. We urge you to note the Cooper standards to determine your 50% standard measure and test yourself against these standards prior to registering for the academy. \*Please note that it is ultimately up to the individual candidate to successfully meet his or her required physical fitness standard. Our PT staff is available for assistance and guidance, but we cannot guarantee every cadet's success. It is imperative that candidates come to the academy in shape.

I have read the above information and understand that entrance into the academy is not a guarantee that I will fulfill the DCJS mandated physical fitness standards. I understand that failure to pass the physical training aspects of the academy will result in failure to earn academy certification.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Alfred State College Police Academy

## Background Check Information

Having the privilege to attend any police academy requires that you demonstrate good judgment, integrity, and be a person of high moral character. To maintain the public trust and agency confidence in the Alfred State Police Academy, the academy requires that all applicants complete a background check. As part of the process, the committee requires that you submit the following documentation for review:

- **A copy of your unsuppressed criminal history record from the NYS Division of Criminal Justice Services or equivalent document for jurisdictions outside of NYS. Official Criminal History Records are to be obtained by the accepted student. Contact DCJS toll-free at 1-800-262-3257.**
- **Your driving record abstract from the DMV.**
- **A list of at least *five-character* references, including supervisors from recent employment. Letters of recommendation can be submitted alongside the list of references.**
- **Photocopy of valid driver's license**
- **Photocopy of social security card**
- **Photocopy of proof of citizenship (birth certificate or passport)**
- **Official high school or GED transcript, Official college transcript (if applicable) \***
- In addition, a personal interview may be held with the committee if it is deemed necessary to clarify or verify any information you submit.

Information regarding your background inquiry will be maintained in a secure, confidential manner with access restricted to the academy administrative staff. After evaluating all the information submitted, the Alfred State Police Academy Advisory Board will decide whether to grant or deny your participation. In the event you fail to submit the requisite information for review in a timely fashion, the committee will defer the decision until all necessary information is received and reviewed.

*It is your responsibility to submit the required documentation in a timely manner and not up to the academy or any of its members to obtain any documentation on your behalf. Failure to submit the required documentation in a timely manner could delay or preclude your participation in the program. The decision of the committee is final and there is no mechanism to appeal the decision.*

Completed documentation should be sent to:

Alfred State College Police Academy

Theta Gamma House - UPD

Alfred, NY 14802

# Alfred State College Police Academy

## Authorization for Release of Information for Background Check

Full Legal Name: \_\_\_\_\_  
Last Name First Name Middle Name

Other Name/Nicknames/AKA: \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_ Do you have a current driver's license? \_\_\_\_\_

State Issued: \_\_\_\_\_ License Number: \_\_\_\_\_

I authorize Alfred State Police Academy to run a background check for the purpose of enrolling in the pre-employment Police Basic Training Course. I acknowledge and understand that Alfred State Police Academy must thoroughly investigate my employment background, criminal history, personal background, education, credit history and reports, medical records, and military records and references to evaluate my qualifications for enrollment into the Alfred State Police Academy.

- I understand that any information obtained by this background check will be considered in determining my suitability for enrollment into the Alfred State Police Academy.
- I understand that falsification, misrepresentation, or omission of any facts pertaining to this background check will be cause for denial of enrollment into the Alfred State Police Academy or termination from said academy.
- I understand unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of this background check will result in denial of enrollment or termination from the Alfred State Police Academy.
- I understand that if contradictory results are found, additional information may be requested of me to help verify identity and or validity of the background check.

**I hereby give permission to all entities containing knowledge of my personal, medical, criminal, educational, financial, and employment history and background to release any information requested by the Alfred State Police Academy.**

This release will be valid for up to one year from the date of applicant's signature below.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Alfred State College Police Academy

## Waiver of Felony Conviction

I understand that conviction of a felony in New York State will bar appointment as a police officer. I affirm, under penalty of perjury, that I have NOT been convicted of a felony (or equivalent crime in another state).

Name (print): \_\_\_\_\_

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

Signature: \_\_\_\_\_

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

## Liability Waiver

All participants in programs and opportunities provided by Alfred State are exposed to the possibility of physical injury due to the nature of these activities. Participants accept this risk and responsibility as their own by choosing to participate in these activities. By so participating, each participant waives and releases all rights and claims for damages that the participant, and his/her heirs or successors, may have resulting from the participant's participation in Alfred State programs and opportunities.

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

Class: Alfred State Police Academy

Participant's Name (print): \_\_\_\_\_

Participant's Signature: \_\_\_\_\_

Agency Name: (if applicable) \_\_\_\_\_

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

Agency Phone: \_\_\_\_\_ Agency Fax: \_\_\_\_\_

Agency Email: \_\_\_\_\_

Agency Training Officer or Contact Person: \_\_\_\_\_

# Alfred State College Police Academy

## Medical and Exercise Profile

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

**Rate yourself on a scale of 1 to 5 (1 indicating the lowest value and 5 the highest).**

Characterize your present athletic ability:	1	2	3	4	5
Characterize your present muscular capacity:	1	2	3	4	5
Characterize your present flexibility capacity:	1	2	3	4	5
Characterize your present cardiovascular capacity:	1	2	3	4	5

**What sports do you play?** \_\_\_\_\_

**What sports injuries do you have?** \_\_\_\_\_

**Please circle yes or no to the following questions:**

1. Has your doctor ever said you have a heart condition or recommended only medically-supervised activity? Yes/No
2. Do you have chest pains brought on by my physical activity? Yes/No
3. Have you developed chest pains at any time in the last month? Yes/No
4. Do you tend to lose consciousness or have spells of dizziness? Yes/No
5. Do you have a bone or joint problem that could be aggravated by the proposed physical activity? Yes/No
6. Has a doctor ever recommended medication for high blood pressure or for a heart condition? Yes/No
7. Are you aware, through your own experience or a doctor's advice, of any other physical reason against your exercising without medical supervision? Yes/No

**Please check in the appropriate space if you have any of these conditions and if they would limit your participation in physical training:**

<input type="checkbox"/> allergies	<input type="checkbox"/> family history of heart disease	<input type="checkbox"/> high cholesterol
<input type="checkbox"/> arthritis	<input type="checkbox"/> dizzy spells or faintness	<input type="checkbox"/> pregnant
<input type="checkbox"/> diabetes	<input type="checkbox"/> asthma	<input type="checkbox"/> migraines/headaches
<input type="checkbox"/> epilepsy	<input type="checkbox"/> obesity (more than 25 lbs)	<input type="checkbox"/> a smoking habit
<input type="checkbox"/> hernia	<input type="checkbox"/> other _____	

# Alfred State College Police Academy

Do you take medication on a regular basis? Yes/No

If yes, what type:

I am aware of my medical profile. I agree not to hold my instructor or Alfred State liable for any injury or illness sustained by me as a result of my participation in the program.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Physician's Statement

I have examined the following pre-employment police cadet candidate:

I understand that job qualifications essential to all police programs require that the candidate be able to function at a higher level of physical condition. I also understand that in order for the candidate to successfully complete the pre-employment program, he/she will be required to participate in **rigorous physical training that includes long distance running, push-ups, sit ups, defensive tactics as well as numerous cardiovascular and strength conditioning exercises.**

I find the cadet to be physically able to participate in the rigorous physical training required by law enforcement officers.

Physician's Signature:

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

Please print the following:

Physician's Name: \_\_\_\_\_

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

Office Phone: \_\_\_\_\_

# Alfred State College Police Academy

## Payment Policy

**Deposit:** Once a completed application has been received, all applications will be reviewed by a panel from the Police Academy Advisory Board. If approved, acceptance is finalized upon receipt of a \$500 **non-refundable** tuition deposit and a successful Physical Training test that meets at least 40% of the Cooper Standard prior to the start of the academy. (See physical fitness requirement)

**Remainder of payment/payment plan:** The first installment of \$2625 is due on or before May 8, 2026, with no exceptions. If the cadet does not pass the Physical Training test that is held prior to the start of the academy, this portion of the money will be refunded.

The second installment of \$2625 is due on or before June 8, 2026, with no exceptions. Failure to adhere to this payment date will result in dismissal from the academy without refunding of prior money paid.

## **Submitting payment:**

You **MUST** pay by check. All checks are to be made payable to: **The Research Foundation** and sent to the following address:

Center for Extended Learning  
Alfred State College  
10 Upper College Drive  
Alfred, NY 14802

Are you looking for a way to finance your enrollment in the Alfred State Police Academy? The following preferred lenders have private loan options available for continuing education programs. Alfred State preferred lenders have demonstrated a commitment to providing the very best customer service, technology, and borrower benefits. Payment for the academy is due on May 12, 2024. Please be sure to apply for a private loan no later than four weeks prior to ensure funds are available.

- Sallie Mae Career Training Smart Option Loan – [www.salliemae.com/student-loans/career-training-smart-option-student-loan/](http://www.salliemae.com/student-loans/career-training-smart-option-student-loan/)  
When applying with Sallie Mae, please select "Police Academy at Alfred State" or use school code "002854-98" as the program/institution. Students will select the Undergraduate Smart Option Loan.
- Wells Fargo Student Loan for Career and Community Colleges – <https://www.wellsfargo.com/student/community-college-loans/> -  
When applying through Wells Fargo, students must select SUNY College of Technology at Alfred - Police Academy as the program/institution, then select the Wells Fargo Collegiate Loan.

Borrower benefits for each lender include no additional loan fees and a 0.25% reduction in interest for automatic payment. A co-signer may be required depending on borrower's age and credit history.

Please review each lender's website for more detailed information.

**Are you a veteran? The Alfred State College Police Academy accepts the GI Bill for veterans. It is up to you as the cadet to get this paperwork done in a timely manner.**

# Alfred State College Police Academy

## Police Academy Cost Estimate:

Course	\$5750
Housing (optional)	\$900*
Meals (optional)	<u>\$2520**</u>
Total Cost	\$9170

\*Housing is available on campus for \$50 per week. Phase one will be 14 weeks. Should the cadet be picked up by a department, phase two will be 5 weeks. **Cadets who leave the academy for any reason will not be refunded any portion of their housing fee.** For the majority of the academy, cadets will be housed in apartment like dorms with full kitchens, individual bedrooms, multiple bathrooms, etc. Please note that once the Alfred State students return for the fall semester, cadets may be required to move to a different dormitory. This dorm will be the standard dorm room facility with double occupancy per room and a shared bathroom.

\*\*Participants are responsible for their own meals. The on-campus housing option includes a kitchen for meal preparation and storage. This includes an estimate of \$20 per day for the average 18-week course.

## \$5,750 Price includes:

1. Full academy programming/instruction/Penal Law, CPL, V&T books on flash drive
2. Academy uniform (Long Sleeve Top, Pants, 1 Polo Shirt, 1 pair BDU pants, Black Garrison Belt, Ball Cap, Name Tag)
3. 1<sup>st</sup> set of PT/DT gear (2 t-shirts and 1 pair of shorts)
4. Sweatshirt
5. Black duty bag
6. Access to academy texts/resources

## Price Does **NOT** include:

1. Additional PT/DT gear (optional)
2. Boots (Non-patented leather)
3. Black crew socks, black crew neck t-shirts
4. Laptop (required)
5. Optional housing available - \$50 per week

Questions about the academy can be directed to 607-587-2625 or [richarsa@alfredstate.edu](mailto:richarsa@alfredstate.edu) or Tammy Edwards [edwardtl@alfredstate.edu](mailto:edwardtl@alfredstate.edu)

# Alfred State College Police Academy

## Penalty for withdrawal and refund policy:

Please be aware of our withdrawal/dismissal refund policy as part of your application process. If you decide to withdraw or are dismissed from this program, you must meet with the Director of the Police Academy for an exit interview and the required withdrawal paperwork.

Refunds will be given as follows: **(minus \$500 deposit)**

100% refund up until the first day of class (Prior to May 15 at 8:00 a.m.)

75% refund within the first week of class (between May 18, 19, 20, 21, 22)

50% refund from within the 2nd week of class (May 25, 26, 27, 28, 29)

0% refund after May 29 at 4 p.m.

Your signature below ensures that you have understood and agree to the policy stated above. There will be no exceptions to this policy.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## EMERGENCY CONTACT INFORMATION

1<sup>st</sup> Emergency Contact Person

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

Phone number: \_\_\_\_\_ Relationship to cadet: \_\_\_\_\_

Email: \_\_\_\_\_

2<sup>nd</sup> Emergency Contact Person

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

Phone Number: \_\_\_\_\_ Relationship to cadet: \_\_\_\_\_

Email: \_\_\_\_\_

# Alfred State College Police Academy

## Attendance Policy:

1. Failure of a Cadet to report to any duty assignment or class at the prescribed date and time will render the Cadet absent without leave status resulting in disciplinary action. Only the Academy Director, or his/her designee, may excuse a Cadet from any assigned duty or class.
2. A Cadet is considered late if not in the proper place at any assembly, formation or class session according to the time listed on the schedule published by the Academy or emails or communications issued by the Academy Director, or his/her designee.
3. No Cadet will leave the Academy without first obtaining the permission of the Academy Director, or his/her designee.
4. No extended leave of absence will be granted to a Cadet except in the case of an emergency. The Academy Director, or his/her designee, will determine what constitutes an emergency.
5. Any classes missed will be reported to DCJS as incomplete. Classes may be made up by the Cadet on their time at the *discretion* of the Academy Director. Repeated absences may result in dismissal from the Academy. Completion of the following classes are **mandatory** and failure to complete them may result in dismissal from the Academy:

**PENAL LAW**  
**CRIMINAL PROCEDURE LAW**  
**VEHICLE AND TRAFFIC LAW**  
**ARTICLE 35 – USE OF FORCE**  
**PHYSICAL TRAINING**  
**DEFENSIVE TACTICS**

Your signature below ensures that you have understood and agree to the policy stated above. There will be no exceptions to this policy.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Alfred State College Police Academy

THIS FORM IS USED TO ENSURE STUDENTS ATTENDING A PRE-EMPLOYMENT POLICE BASIC TRAINING PROGRAM HAVE BEEN ADVISED OF THE PROGRAM REQUIREMENTS AND RULES AND REGULATIONS GOVERNING TRAINING AND APPOINTMENT AS A POLICE OFFICER. FORMS PRESENTED FOR FILING MUST CONTAIN ORIGINAL SIGNATURES. ALTHOUGH THE BLANK FORM MAY BE DUPLICATED, PHOTOCOPIES OF COMPLETED FORMS OR FORMS WITH PHOTOCOPIED SIGNATURES WILL NOT BEACCEPTED.

---

Students in the pre-employment Police Basic Training Course must be advised of several conditions of this training program that will affect them during and after attending the program. Schools are required to advise the student of these conditions by the policy established for this program by Division of Criminal Justice Services.

1. Completion of this program is **not a guarantee of employment** as a police officer.
2. To complete this pre-employment training program, a student must participate in physical fitness training and satisfactorily complete a physical fitness examination
3. To complete this pre-employment training program, a student must comply with mandated New York State regulations that include strict attendance requirements; maintaining a notebook; and passing written examination/s.
4. This is a two-phase program. The first phase is conducted pre-employment and the second phase is conducted after appointment as a police officer. Each individual phase of this training program must be completed as a single and cohesive unit. This means that students must complete the phase of the program at one institution. The following phase may be conducted at a separate institution.
5. Before being appointed as a police officer, a person must complete New York State Civil Service requirements and appointing agency hiring standards (including minimum and maximum age and residency requirements) by taking a written examination and scoring high enough on the eligibility list to be considered for appointment.
6. Before being appointed as a police officer, a person must take and satisfactorily complete a physical fitness examination.
7. Before being appointed as a police officer, a person must submit to a medical examination, which may include drug screening.
8. Before being appointed as a police officer, a person may be required to submit to a psychological examination.
9. Before being appointed as a police officer, a person with criminal conviction or with a felony conviction may be disqualified from employment.
10. Before being appointed as a police officer, a person may be required to submit to a background investigation, which may include a polygraph examination.
11. Upon appointment as a police officer, a person will be required to satisfactorily complete additional training. Failure to complete this training will result in denial of certification by the New York State Municipal Police Training Council. This certification is required by §209-q of the General Municipal Law for police officers to remain in their positions.
12. Pre-employment training will be valid for two years after completion of this program. If a person is not appointed before two years has elapsed, they will be required to attend a Police Refresher Course. After 10 years from the date of completion records on the transcript, the training will no longer be valid (this is consistent with the provision of §209-q of the General Municipal Law pertaining to police officers).

**Applicant Attestation:** *This affidavit must be signed and sworn to by the applicant before a Notary Public. I hereby attest that the information in this application is true to the best of my knowledge and belief. I understand that any omission or inaccuracy may be deemed sufficient reason to deny certification, I understand the Division of Criminal Justice Services may ask for additional information or documentation.*

Student Signature	Date
School Director Signature	Date

# Alfred State College Police Academy

**Affirmation – this affidavit must be signed and sworn to by the applicant before a Notary Public.**

I, \_\_\_\_\_, under penalty of perjury do hereby affirm that to the best of my knowledge and belief the information contained in my cadet registration package is true and accurate.

I understand that any omission or false and inaccurate information could be punishable as a class A misdemeanor pursuant to section 210.45 of the New York State Penal Law and could be deemed sufficient reason for disqualification of my application to the Alfred State Police Academy.

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

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

State of \_\_\_\_\_

County of \_\_\_\_\_

On this of \_\_\_\_\_, 20\_\_ before me personally appeared acknowledged to be the person described in and who executed the foregoing consent and who acknowledged to me that he/she executed the same for the purpose therein stated.

Notary Signature/Stamp: \_\_\_\_\_

# Alfred State College Police Academy

**Checklist: Please be sure you have enclosed the following forms and items when returning your application:**

1. **Application form** – clearly printed – signed – dated (page 1 and 2)
2. Photocopy of valid driver's license
3. Current abstract of driving record can be obtained at NYS DMV ([dmv.ny.gov](http://dmv.ny.gov))
4. Photocopy of social security card
5. Photocopy of proof of citizenship (birth certificate or passport)
6. Official high school or GED transcript\*
7. Official college transcript (if applicable) \*
8. Physical Fitness Readiness – signed – dated (page 3)
9. Background Check Release – signed – dated (page 5)
10. Liability Waiver – signed – dated (page 6)
11. Waiver of Felony Conviction – signed – dated (page 6)
12. COVID-19 Vaccination – signed-dated (copy of vaccination card enclosed) (page 6)
13. Medical and Exercise Profile – signed – dated (page 7)
14. Physician's Statement – signed by physician (page 8)
15. Payment Policy – signed – dated (page 9)
16. Withdrawal and Refund Policy – signed – dated (page 11)
17. Emergency Contact Information – (page 11)
18. Attendance Policy – signed – dated (page 12)
19. Cadet Warning Notice – signed – dated – **Notarized** (page 13)
20. Affirmation page – signed – dated – **Notarized** (page 14)

**\*Official transcripts must be received in a sealed, signed envelope by issuing school or college. They must be received unopened and intact. Official transcripts may be mailed with your application or sent directly from the school or college to the Center for Community Education and Training at Alfred State.**

**Mail completed packet to:**

**Alfred State College Police Academy**

**Alfred State College**

**Theta Gamma House**

**10 Upper College Drive**

**Alfred, NY 14802**