



# Elsa Police Department

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Thank you for your interest in the Elsa Police Dept. Public Safety Cadets program. Please complete this application and return it by September 25<sup>th</sup> 2025.

## Applicant Information

Full Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Age: \_\_\_\_\_  
Grade Level: \_\_\_\_\_  
School Name: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City, State, ZIP: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_

## Parent/Guardian Information

Parent/Guardian Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Relationship: \_\_\_\_\_

## Consent & Agreement

By signing, I agree to participate in the **Elsa Police Department Public Safety Cadet Program**. I understand that I am expected to attend all sessions, participate actively, and conduct myself respectfully. I also grant permission for photos and videos for promotional purposes.

For questions, please contact: Captain Rolando Cano at 956-262-4721 or email: [rcano@cityofelsa.net](mailto:rcano@cityofelsa.net)

**Captain ~ Rolando Cano**  
216 E. 4<sup>th</sup>. Street / P.O. Box 427 ~ Elsa, TX. 78543  
Phone: 956.262.4721 ~ Fax: 956.262.2632

# Public Safety Police Cadet Program

Elsa Police Department's Public Safety Cadet Program  
**2025–2026**

The **Elsa Police Department's Public Safety Cadet Program** (Police Cadet Program) is a mentorship initiative designed to equip local youth with essential life skills, professional development, and career preparation. While the program emphasizes **law enforcement practices**, Recruits receive a **well-rounded introduction to the Criminal Justice field** and related professions.

All participants in the **Elsa Police Department's Public Safety Cadet Program** will gain exposure to **police practices, physical agility training, volunteer work, life skills**, and other activities focused on their personal and professional growth. Anyone between the ages of **14–20** who is enrolled full-time in **grade school, college, or university** may apply.

As part of **Public Safety Cadets LLC**, each participant must pay an **annual \$20.00 fee** to join, which covers chapter registration. This fee demonstrates commitment to the program. The program is not funded by police department or city funds. Participants are responsible for purchasing their own **pants, boots/black shoes, and uniform shirt**.

## Program Conduct & Expectations

- Participation in the **Police Cadet Program / Elsa Police Department's Public Safety Cadet Program** does not place you above the law. Higher standards of conduct are expected because you represent the **Elsa Police Department's Public Safety Cadet Program**.
- Advisors will not provide special treatment in cases of arrest or legal issues. Students and parents must never use an advisor's name to avoid consequences.
- Any disrespect or hostility toward Elsa Police Department officers or program advisors will not be tolerated.

## Membership Disqualifiers

- Drug or alcohol use
- Being identified as a suspect in a criminal offense or arrest
- Criminal behavior or actions
- A pattern of repeated police contacts
- Failing grades
- Unfavorable behavior at home or school
- Unfavorable or illegal social media activity
- Any other reasons determined by the program advisors or the Chief of Police



## 2025 Application Process

1. Submit Initial Application
2. Complete Background Check

## Advisor Authority & Commitment to Recruit Safety

- The **Police Cadet Program / Elsa Police Department's Public Safety Cadet Program** is led and supervised by trained Elsa Police Department officers.
- All advisors are sworn police officers dedicated to fostering positive relationships with youth through structure, mentorship, and guidance.
- The **safety, wellness, and personal development** of each Recruit is our highest priority.
- Our approach is rooted in **care, professionalism, and accountability**, supporting each Recruit's growth, self-discipline, and leadership potential.
- All decisions by advisors, including discipline or emergency responses, are made to protect Recruits and maintain a safe and respectful environment.

## Criminal Conduct, Behavioral, and Mental Health Support

- Participation in the **Police Cadet Program / Elsa Police Department's Public Safety Cadet Program** is a privilege requiring lawful, respectful behavior.
- Any criminal activity by a Recruit, on or off program grounds, may lead to law enforcement action.
- Serious behavioral concerns such as aggression, bullying, or self-harm threats will be addressed immediately and may result in removal from the program.
- Parents/guardians must disclose any behavioral, mental health, or physical conditions that could affect participation.
- Advisors are trained to recognize concerning behaviors and will respond as needed to protect all Recruits.
- Parents/guardians will be notified promptly of any criminal, behavioral, or mental health issues.

## Recruit Responsibilities

### Punctuality

- Arrive on time for all sessions, classes, and scheduled activities.
- Notify staff in advance if late or absent.

### Hygiene

- Maintain good personal hygiene, including regular bathing, clean clothes, and grooming.
- Follow any hygiene guidelines provided by program staff.

## **Cell Phones & Electronic Devices**

- Keep phones on silent or vibrate during classes/training.
- Phones may be accessed during emergencies but should otherwise remain in designated areas.
- No phone use without advisor permission or during breaks.
- Do not record or photograph activities without advisor consent.

## **Social Media & Anti-Discrimination**

- Use social media responsibly; refrain from posts or actions that harass, bully, discriminate, or cause emergency concerns.
- Violations may result in disciplinary action, including dismissal.

## **Respect & Behavior**

- Treat officers, speakers, peers, and property with respect at all times.
- Follow directions and maintain a cooperative attitude.
- Avoid inappropriate language, conduct, or gestures.
- Address officers by their title during public events and formal communication.

## **Participation & Effort**

- Fully participate in physical training, team-building, and educational sessions.
- Give your best effort and represent the program with pride.
- Notify the advisor if uncomfortable participating in an activity.

## **Communication with Advisors**

- Respect advisors at all times.
- Limit messages to normal hours unless it's an emergency.
- Use the WhatsApp group chat for program questions or updates.
- Speak with any advisor regarding concerns, mental health issues, or criminal/unusual behavior.
- Understand advisors are police officers and may be legally required to report certain incidents.
- Recognize advisors' role to **educate, mentor, and empower**.

## **Parent/Guardian Information & Responsibilities**

### **Communication for the Police Cadet Program**

- All program updates occur through WhatsApp, monitored by advisors.



- Parents may join the group but are encouraged to let their child handle communication directly (absences, info requests, etc.).
- Parents who overstep or contact other students will be removed from the WhatsApp group.

### **Support & Communication**

- Support your child's participation and behavior expectations.
- Communicate promptly regarding absences, concerns, or medical updates.
- Encourage respectful and responsible behavior outside program hours.

### **Transportation**

- Ensure your child is dropped off and picked up on time or communicate alternative arrangements.
- Notify advisors if pickup will be late.

### **Authorized Pick-Up**

- Notify advisors in writing of any restrictions or instructions about who is authorized to pick up your child.
- Officers trust the listed person picking up your child. IDs are not checked unless concerns arise.

### **Medical Clause**

- Authorize program staff to administer basic first aid and seek emergency care if needed.  
☐ YES  
☐ NO
- Provide updated medical info (allergies, conditions, medications).
- Understand the Police Department and program staff are not liable for injuries arising from normal program activities except in cases of gross negligence.

### **Physical Agility Activities Consent**

- Acknowledge the program includes running, calisthenics, drills, and obstacle courses.
- Confirm your child is physically capable of participating or provide documentation of limitations.
- Release Elsa Police Department and staff from liability for injuries during properly supervised activities.  
☐ My child is cleared to participate.  
☐ My child has the following limitations: \_\_\_\_\_

### **Emergency Contact & Communication Policy**

- Parents/guardians must remain reachable during program hours.
- If staff cannot reach a parent/guardian after three attempts, a uniformed police officer may be dispatched to the listed address for safety.
- This policy protects the safety of all participants and staff.
- Keep all emergency contact info up to date.

**Primary Emergency Contact:** \_\_\_\_\_

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

Known Medical Conditions/Allergies: \_\_\_\_\_

**Alternate Emergency Contact Name:** \_\_\_\_\_

Relationship to Recruit: \_\_\_\_\_

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

## Media/Photo Liability Release

- Your child may be featured in local news or social media.
  - Grant permission for photos or recordings during program activities.
  - Photos/videos may be used for program promotion, news, or internal reports.
  - Release Elsa Police Department and affiliates from claims related to such media.
- ☐ I give permission for my child's image to be used.
- ☐ I do NOT give permission for my child's image to be used.

## Dress Code

- Recruits must wear their assigned program shirt with khaki pants and black military boots or black tennis shoes during all program activities unless otherwise directed.

## Notification of Absences or Tardiness

- Recruits must notify program advisors at least one hour in advance if absent or late.

## Reasons for Dismissal

The Elsa Police Department reserves the right to suspend or remove any Recruit for:

- Repeated or severe misconduct.
- Disrespectful or threatening behavior.
- Misbehavior at home or elsewhere that reflects poorly on the program.
- Criminal activity.
- Use or possession of drugs, alcohol, weapons, or tobacco.
- Unsafe driving or traffic violations (for driving-age Recruits).
- Failure to follow program rules despite prior warnings.

No refund or reinstatement will be offered in the event of dismissal.

## Acknowledgement and Agreement

By signing below, we acknowledge and accept the expectations and responsibilities of participating in the **Police Cadet Program / Elsa Police Department's Public Safety Cadet Program**.

Recruits over 18 do not need a parent/guardian signature.

Recruit Name: \_\_\_\_\_  
Recruit Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_  
Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_





## PUBLIC SAFETY CADETS – AGREEMENT AND LEGAL WAIVER FORM

### AGREEMENT AND LEGAL WAIVER

I declare that all statements on this enrollment form and attachments are true and complete to the best of my knowledge. I understand that false, misleading, or incomplete information shall be cause for disqualification or termination from the Public Safety Cadets program (hereinafter "Cadets Program"). I understand that my participation in the Cadets Program is voluntary and at an "at will" status; and that the sponsoring agency/organization, acting through its Cadets Program Unit, is free to discharge me without cause and I am free to discontinue participation in the program at any time. I understand the importance of providing accurate medical information, I certify that all information provided is accurate, and I acknowledge that there are no undisclosed physical limitations that would prevent me from participating in all aspects of the Cadets Program. I understand that participation in the Cadets Program involves the risk of personal injury, including death, due to the physical, mental, and emotional challenges of the Cadet Program activities. I agree that approved Mentors and program volunteers may provide transport during Cadets Program activities. I also understand that in the event of serious illness or injury, reasonable efforts will be made to contact the parent or guardian, if listed below.

### AGREEMENT ASSUMING RISK OF INJURY OR DAMAGE, WAIVER AND RELEASE OF CLAIMS

With appreciation of the dangers and risks associated with the Cadets Program, I hereby release, acquit and forever discharge the Public Safety Cadets, the partnering agency/organization and its officers, agencies, and employees of and from any and all rights, claims, demands, actions, causes of action, damages, costs, losses of services, compensation, and debts, including attorney's fees (collectively "claims") which I may have against the Cadets Program, whether known or unknown, which result from, arise from, or are related in any way to my participation in the Cadets Program or any activities or events related thereto. I hereby agree to hold harmless Public Safety Cadets and the partnering agency/organization from and against any and all claims which result from, arise from, or are related in any way to my participation in the Cadets Program excluding only claims that are attributable to the gross negligence or willful misconduct of Public Safety Cadets and/or the partnering agency/organization.

Should I require emergency medical care while participating in the Cadet Program, I hereby give sponsoring agency/organization personnel my permission to use their judgment in obtaining care for me and I give permission to the medical care provider selected by the Cadet Program personnel to render medical care deemed necessary and appropriate. Such consent includes any x-ray examination, anesthetic, medical or surgical diagnostic or treatment and/or hospital service that may be rendered. I understand that Public Safety Cadets or the sponsoring agency/organization is not obligated to provide medical treatment and that any cost incurred for treatment provided which is not covered by insurance shall be my sole responsibility. I warrant that I understand the content of the foregoing authorization and release. My signature, hereon, is my own free act and it is my intention to be legally bound hereby.

### WAIVER FOR CONSENT FOR PHOTOGRAPHS

I do hereby consent to being photographed, by professional and/or amateur photographers, while participating in any detail, event, function, or activity related to the Cadets Program. I also give my consent for the Public Safety Cadets and/or the partnering agency/organization, including any Division or unit therein to use my name, likeness, image, appearance, and biographical information ("Image"), in, on or in connection with any photographs, pictures, digital images, websites programs, printed materials and any and all media, whether now known or hereafter developed, throughout the world at any time, for the legitimate purposes of Public Safety Cadets. I hereby expressly waive all claims for royalties or other compensation related to any such use of my Image or related information and release Public Safety Cadets and the partnering agency/organization from any and all liability which may arise as a result of being photographed while participating in the Cadets Program, and for the subsequent use and display of the Image. I understand that this consent/waiver and release will remain in effect until such time that it is revoked, in writing, by me. Public Safety Cadets and the sponsoring agency/organization retains the right to use the aforementioned Image for the purposes stated herein, whether or not I continue to be involved in the Cadets Program, absent my written revocation of consent.

I understand that Public Safety Cadets shall have no obligation to use the Image, and that all creative decisions regarding the use of the Image shall be at the sole discretion of Public Safety Cadets or the sponsoring agency/organization.

By signing below, all Cadet Applicants, Parents, Guardians, Partnering Agency/Organization Unit Mentors have read, understand, and agree to all conditions listed herein.

***I acknowledge and agree that this Release & Waiver is binding upon me, my heirs, assigns and legal representatives:***

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

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

Cadet Printed Name: \_\_\_\_\_

***If participant is a minor child, I, as his/her parent/legal guardian, agree on his/her behalf:***

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

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

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