

APPENDIX D



**Acknowledgement of Risk and
Assumption of Personal Responsibility
Delaware Technical Community College
Law Enforcement Option**

I, the undersigned, am enrolled as a student in the Law Enforcement Option program. The Law Enforcement Option is the result of a partnership between the Delaware Technical Community College and a Delaware Police Training Academy, under the auspices of the Council on Police Training, to provide academic training in accordance with the requirements necessary for an entry level police officer in the State of Delaware.

The Law Enforcement Option includes a physical training component which may expose me to above-normal risks to my personal safety. I understand that following the directives of the instructor will aid in minimizing those risks. I agree to comply with the instructions and directions of the Law Enforcement Option instructors. I believe that I have no physical or psychological problems that would prohibit my safe participation in this training, and believe myself to be in good physical condition.

I understand too, that although precautions have been taken to provide for my safety in the training, it is impossible to guarantee my absolute safety during the physical component of the Law Enforcement Option. I understand that I share in the responsibility for my safety, and I assume that responsibility of my own free will. I understand that my participation in this physical training involves the risk of injury including, but not limited to; musculoskeletal tears, sprains, fractures and breaks, heat disorders, abnormal blood pressure, fainting, heart attack, stroke, or even death. I also recognize that there are other risks of injury, including serious disabling injuries that may arise due to my participation in the physical training portion of the Law Enforcement Option and that it is not possible to specifically list each and every injury. However, knowing the material risks involved with the physical training in the Law Enforcement Option, and reasonably anticipating that other injuries and even death are a possibility, I hereby expressly assume all of the delineated risks of injury, all other possible risks of injury and even risk of death, which could occur by reason of my participation in the Law Enforcement Option training.

In consideration of, and as part payment for my participation in the Law Enforcement Option, I assume all of the above risks and will hold the College, its trustees, employees, and agents, harmless for any and all liability including negligence actions, claims, debts and demands of every kind whatsoever which occur directly or indirectly as a result of my participation in the Law Enforcement Option. The terms of this release and assumption of risk serve as a release and assumption of risk for my heirs, executors and administrators. By signing my name below, I certify that I have read, understand and enter into this agreement freely and voluntarily.

Print Participant's Name

Participant's Signature

Department Chairpersons signature

Date: _____

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