



San Diego County Law Enforcement Explorer Advisors' Association

Thursday, January 16, 2020

Explorer/Cadet Advisors,

The 2020 San Diego County Explorer Academy will be held at the University of California, San Diego (UCSD) and will begin with registration on **Saturday, June 20, 2020** at 0900 hours and our commencement will be held on **Saturday, June 27, 2020** at Bob Hope Theater (MCCS Miramar Station) at 1100 hours. This year marks the 13th year our academy has been hosted by UCSD and we will be housed at Eleanor Roosevelt College (ERC).

Advisors must submit the Agency Reservation form (2 pages/per agency), Advisor registration form (3 pages/per Advisor) and Explorer/Cadet Registration forms (5 pages/per participant) by mail or scanned and emailed to sdcleaa@gmail.com no later than **Friday, March 13, 2020**. These forms are required for housing assignments and phase placement. Please ensure all names, genders, ages and phases are correct. An advisor must sign the Explorer's liability waiver to ensure they meet the minimum physical fitness prerequisites. The Physical/Medical forms must be submitted by mail on or before **Monday, June 1, 2020**. Explorers will not be eligible to participate if the proper medical and physical clearance forms are not completed and signed by a license practitioner prior to the start of the academy. If your Explorer has any dietary restrictions, the UCSD dietary form must be completed and submitted directly to the college 30 days prior to the start of the academy. All curriculum and instruction will be taught in English.

All participants attending will be assigned to a phase specific room assignment and **no visiting Explorers** are permitted to attend without prior approval from the Academy Director. Remember at least one Advisor **MUST** be in attendance for the full duration of the academy. All advisors are assigned to Phase 4. Please review the rules in reference to electronic equipment and guidelines on the filming of our activities by anyone while attending the academy. Advisors must email the Phase 4 Coordinator, Kern County DAI Elizabeth Luckhardt prior to March 13, 2020 to received up-to-date information regarding scheduling and Phase 4 assignment sign-ups.

The cost per attendee will be **\$470**. The initial deposit, **\$235 per attendee**, must be received by **April 1, 2020**, the remainder and final payment must be received no later than **June 1, 2020**. Make checks payable to "SDCLEEAA". Departments have the option to pay by credit card; however, the 3% transaction fee will be added to the total cost. Please note, **NO REFUNDS** will be issued after the final payment deadline.

As always if you have any questions or need any assistance please do not hesitate to contact me by email or by phone. Our phase coordinators, association members and instructors will be working diligently to coordinate an amazing training program. On behalf of our association, we look forward to seeing all of you on June 20th.

Sincerely,

Pricilla Graton

Pricilla Graton, Academy Director
(619) 600-7808 cell
SDCLEEAA@GMAIL.COM

Elizabeth Luckhardt, Phase 4 Coordinator
ELuckhardt@kernda.org

AGENCY: _____ PHASE/SQUAD: _____ AGE: _____ F / M LAST: _____
For office use only



San Diego County Law Enforcement Explorer Advisor Association **ADVISOR REGISTRATION FORM**

2020 San Diego County Explorer/Cadet Academy

PHASE PLACEMENT : PHASE 4 - ADVISOR

ADVISOR INFORMATION

Full Name: _____ Date: _____
Last First M.I.

Title/Assignment: _____

Special Training or Certification: _____

Cell Phone: _____ Email: _____

Male / Female: _____ Roommate Preference: _____

Are you a member of Public Safety Cadets? YES NO If yes, Unit # _____

Are you a member of Learning for Life? YES NO If yes, Post # _____

Do you have any dietary restrictions? YES NO *If yes, you MUST complete and submit the UCSD form*

If yes, explain: _____

EMERGENCY CONTACT

Name: _____ Relationship: _____

Address: _____ Cell Phone: _____

Email: _____

SPONSORING AGENCY / ADVISOR ATTENDING ACADEMY

Agency: _____ Dispatch Phone: _____

Address: _____

Lead Advisor: _____ Title: _____ Cell Phone: _____

Email: _____

COMPLETE AND SUBMIT THESE FORMS BY **FRIDAY, MARCH 13, 2020.**

AGENCY: _____ PHASE/SQUAD: _____ AGE: _____ F / M LAST: _____
For office use only



San Diego County Law Enforcement
Explorer Advisor Association
ADVISOR LIABILITY WAIVER

2020 San Diego County Explorer/Cadet Academy

ADVISOR LIABILITY WAIVER

I, _____, (ADVISOR) sponsored by _____ (AGENCY) certify my answers and the information provided are true and complete to the best of my knowledge. Our Explorers/Cadets have met the prerequisites for the placement in the requested phase and meet the minimum physical fitness standards established by the San Diego County Explorer Academy. I am aware the Academy has adopted rules and requirements to foster an atmosphere of learning in a safe environment for all. I do not hold UCSD or its affiliates liable for any action or inaction on the part of the San Diego County Law Enforcement Explorer Advisor Association (SDCLEEAA), Public Safety Cadets and/or Learning for Life. I have reviewed and read, in its entirety, the 2020 San Diego Explorer Academy policy and procedures. I agree to abide by the policy and procedures while completing my training at the Academy.

ADVISOR (Print): _____

ADVISOR (Signature): _____ Date: _____

FOR POLICY & PROCEDURE MANUAL AND GRADUATION INFORMATION VISIT: WWW.SDCLEEAA.COM

COMPLETE AND SUBMIT THESE FORMS BY FRIDAY, MARCH 13, 2020.

AGENCY: _____ PHASE/SQUAD: _____ AGE: _____ F / M LAST: _____
For office use only

UNIVERSITY OF CALIFORNIA, SAN DIEGO
CONFERENCE PARTICIPANT GUIDELINES AGREEMENT

Conference Participant agrees to respect the rights of other Conference Participants and to behave in a manner conducive to the harmonious group living environment developed and fostered by members of the University community.

Conference Participant agrees to abide by all University policies, and all applicable local, state and federal laws, including those applying to campus activities, organizations, students, alcohol, smoking, and firearms, which are now in effect or will be put into effect from time to time, and hereby acknowledges the receipt of the following:

Conference Participant understand that the University may take appropriate action, including termination of any housing agreements and/or exclusion from entering into future housing agreements, for conduct which is found by the University to be in violation of any such rules, including but not limited to, policies noted above which is incorporated herein by reference, or conduct which is otherwise detrimental to the welfare of the conference participant, employees or the physical properties of the University.

<https://hdh.ucsd.edu/conferences/docs/Participant-Guidelines.pdf>

Advisor (Print): _____ Agency: _____

Advisor
Conference
Participant
(Signature): _____ Date: _____

EVENT: 2020 SAN DIEGO COUNTY EXPLORER/CADET ACADEMY

COMPLETE AND SUBMIT THESE FORMS BY **FRIDAY, MARCH 13, 2020.**



San Diego County Law Enforcement
Explorer Advisor Association
ADVISOR REGISTRATION DEADLINE CHECKLIST

DEADLINES

FRIDAY, MARCH 13, 2020

- 1. REGISTRATION FORMS**
 - a. Agency Reservation Form
 - b. Advisor Forms (Registration, Liability & UCSD waiver)
 - c. Email Phase 4 Coordinator, DAI Elizabeth Luckhardt ELuchardt@KernDA.org
 - d. Explorer/Cadet forms (Registration, Liability, UCSD, OC & Graduation)

WEDNESDAY, APRIL 1, 2020

- 2. DEPOSIT**
 - a. Check for 50% of the total cost made out to "SDCLEEAA"
 - b. Pay by credit card by phone, 3% fee will be added to total amount.

MONDAY, JUNE 1, 2020

- 3. FINAL PAYMENT *** NO REFUND WILL BE GIVEN AFTER THIS DATE*****
 - a. Remaining 50% of the total cost due by check or credit card, with fee, by phone
 - b. **Physical / Medical forms due – Please send by mail (save the trees)**
 - c. Dietary forms must completed and sent directly to UCSD

Scan and email the forms to SDCLEEAA@GMAIL.COM or send the original copies by mail to:

**Chula Vista Police Department
C/O Agent Pricilla Graton
315 Fourth Avenue
Chula Vista, CA 91910**

AGENCY: _____ PHASE/SQUAD: _____ AGE: _____ F / M LAST: _____
For office use only