



ROXBORO POLICE DEPARTMENT

Citizens Police Academy (5th Session)

Application Form

Complete EVERY question unless stated as "optional" (otherwise your application may be returned as incomplete)

APPLICANT IDENTIFYING INFORMATION (Please print or type) *Application deadline 3/18/11*

Name (Last, First, Middle)		Date	
Address		City	Zip Code
Telephone () -	Mobile Phone (Optional/If Available) () -	Email Address (If available)	
Sex (Circle) Female Male	Birthdate Month Day Year	Race/Ethnicity	Driver's License Number
Occupation	Name of Employer/School		Business Phone (Optional)
How long have you lived or worked in Roxboro? 1. Lived in Roxboro _____ years _____ months 2. Worked in Roxboro _____ years _____ months			

1. EDUCATIONAL BACKGROUND: Please tell us about you educational background, including the highest level of education you have completed.

2. CIVIC ACTIVITIES: Please include any present or past membership on City or County committees, commissions, boards, or participation in the activities of community groups or organizations.

3. YOUR INTEREST: Why are you interested in attending *Citizens Police Academy*? Please include what you would like to learn from the Academy as well as what you would like to share with the Academy. Please Also Include in your response any qualifications/special interests you believe are important.

4. HOW DID YOU FIND OUT ABOUT THE *Citizens Police Academy*? If applicable, please include in this section any organization or individual who *nominated* you to participate in this Academy?

5. HAVE YOU PREVIOUSLY PARTICIPATED IN OTHER TYPES OF CITIZENS ACADEMIES? Please include all other Citizens Academies or similar types of academies you have attended, including the name of the Academy and the year you participated in the Academy.

Name of Academy: _____ Name of Academy: _____
Year Participated: _____ Year Participated: _____

6. DO YOU HAVE ANY PAST ARRESTS, CONVICTIONS OR PENDING COURT CASES?
Include all misdemeanors and felonies. You do not have to include infractions- for example traffic tickets (DWI's are misdemeanors) **YES NO**

a. If you answered "yes" to Question 6, please list below the DATE, AGENCY, CHARGE, AND DISPOSITION. Attach additional sheets if necessary.

Date: _____ Agency: _____ Charge: _____ Disposition: _____
Date: _____ Agency: _____ Charge: _____ Disposition: _____
Date: _____ Agency: _____ Charge: _____ Disposition: _____

CLASS ATTENDANCE

The Citizens Police Academy is an accelerated program with a full agenda each class session. Missing more than two classes will result in a significant gap in the educational process of the academy. I understand that participants who are absent more than two days will not receive a certificate of graduation. **YES NO**

BACKGROUND AUTHORIZATION

I understand that a criminal background and warrant check will be conducted by the Roxboro Police Department as part of the application process. I hereby authorize any law enforcement agency to release to the Roxboro Police Department any and all information, which said agencies have about me, for the limited purpose of aiding the Roxboro Police Department in evaluating my eligibility for participation in the Citizens Police Academy. This authorization extends to any information which said agencies or any of them may have about me, whether public, personal, or confidential. I understand that I will not receive and am not entitled to know the contents of confidential reports received from these agencies. I hereby release, discharge, and agree to hold harmless the agencies, their agents and any person furnishing information from any and all liability arising out of furnishing and inspecting such documents and information.

SIGNATURE OF APPLICANT

DATE

PRINT YOUR FULL NAME

Thank you for your interest and we look forward to your participation in the Roxboro Police Department's 5th Session of the Citizens Police Academy.