



Application for Greater Madison County Citizens Police Academy

Applicant must be 18 years of age or older to attend the Academy
No Prior Felony convictions

Please print in ink or type all answers. If more space is needed, use an additional sheet of paper.

Last Name: First Name:
Full Middle Name: Maiden Name:
Date of Birth: Driver's License Number

Home Address:
City: State: Zip Code:

E-Mail Address (Home):
E-Mail Address (Work):

Home Phone #: Cell Phone #:

Occupation:

Explain your position:
Employer Name:
Employer Address: City:
State: Zip Code: Work Phone #:
Employer Fax #:

In case of Emergency please notify:

Name: Relationship:
Home Phone #: Cell Phone #:
Address:

Please answer **YES** or **NO** to the following questions and provide explanations where needed.

1. Have you ever been arrested for a crime other than traffic offenses? **YES** or **NO**

If yes, please explain with disposition and dates.

NOTE: APPLICANT CONVICTED OF A FELONY IS INELIGIBLE TO ATTEND.

2. Do you have a valid driver's license? **YES** or **NO**

Driver's License number:

3. Are you 18 years of age or older? **YES** or **NO**

4. Do you have any special needs that require accommodation in order for you to participate in this program? **YES** or **NO**

If yes, please explain:

5. How did you hear about the academy?

6. Have you ever applied to the academy before? **YES** or **NO** If yes, please provide date of application.

7. Please state below why you are interested in attending the Citizen Police Academy.

This is a very important question to us, please answer thoroughly.

8. Please list community involved activities, any associations, or organizations in which you participate:

9. List three character references that are not family members or employers:

Name Home Phone #

Name Home Phone #

Name Home Phone #

I hereby certify that there are no willful falsifications, omissions, or misrepresentations in the foregoing statements and answers to questions. I understand that any omission or false statement on this application shall be sufficient cause for rejection for enrollment or dismissal from the Citizens Police Academy. I also grant permission for the Kentucky State Police or other Law Enforcement Agencies to verify the above information contained on this application and check for prior criminal history.

Signature of Applicant

Date