

# GRIFFITH POLICE DEPARTMENT

## APPLICATION FOR CITIZEN POLICE ACADEMY



Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Hm Phone: (\_\_\_\_)\_\_\_\_\_ Wk Phone: (\_\_\_\_)\_\_\_\_\_ Cell Phone: (\_\_\_\_)\_\_\_\_\_

Email: \_\_\_\_\_

DOB: \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_ OLN: \_\_\_\_\_ State \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone#1: (\_\_\_\_)\_\_\_\_\_ Phone #2: (\_\_\_\_)\_\_\_\_\_

Current or most current employer: \_\_\_\_\_

Address: \_\_\_\_\_

Wk Phone: (\_\_\_\_)\_\_\_\_\_ Cell Phone: (\_\_\_\_)\_\_\_\_\_ Email: \_\_\_\_\_

Job Description: \_\_\_\_\_

Have you ever been arrested? YES NO

If yes, please explain (what, where, when, what was the outcome?)

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Are you now or have you ever been an abuser of alcohol or drugs? YES NO

If yes, please explain ...

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Please provide three (2) character references NOT related to you.

#1 Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Hm Phone: (\_\_\_\_)\_\_\_\_\_ Wk Phone: (\_\_\_\_)\_\_\_\_\_ Cell Phone: (\_\_\_\_)\_\_\_\_\_  
Email: \_\_\_\_\_ Relationship: \_\_\_\_\_ How Long? \_\_\_\_\_

#2 Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Hm Phone: (\_\_\_\_)\_\_\_\_\_ Wk Phone: (\_\_\_\_)\_\_\_\_\_ Cell Phone: (\_\_\_\_)\_\_\_\_\_  
Email: \_\_\_\_\_ Relationship: \_\_\_\_\_ How Long? \_\_\_\_\_

## **APPLICANT QUESTIONS**

Applicant Name: \_\_\_\_\_

Why are you wishing to participate in the Citizen Police Academy?

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What do you hope to learn or gain from the Citizen Police Academy?

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Do you have any specific law enforcement interests?

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Do you have any questions?

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