

Application for Citizen's Police Academy Jacksonville Police Department

Please Print or Type

Last Name _____ First Name _____ MI _____

Date of Birth _____ Age _____ Place of Birth _____

Drivers License Number _____ Sex: M F

Street Address _____ City _____

State _____ Zip Code _____

Place of Employment _____

Address of Employment _____

May We Contact You At Work: Yes _____ No _____

Email: _____

Home Phone _____ Work Phone _____

Requirements Shirt Size S M L XL XXL

- 1) Applicants must be 21 years of age or older.
- 2) Applicants must live or work in Morgan County.
- 3) Applicants must have a valid driver's license.
- 4) Applicants must not have been convicted of a felony in the past 10 years.
- 5) Applicants must be willing to sign a waiver for criminal and traffic records check.
- 6) Applicants must attend at least eight out of the ten classes.

Questions

- 1) Have you been convicted of a felony in the last 10 years? Yes No

If yes, explain

2) Are there any charges pending against you now? Yes No

If yes, explain

3) Are there any warrants (traffic or otherwise) pending against you? Yes No

If yes, explain

You may omit any offense committed before your 17th birthday, which were adjudicated in a Juvenile Court under a Youth Offender Law.

References

Include telephone number and address

- 1) _____
- 2) _____
- 3) _____

I hereby swear that there are no willful misrepresentation or omissions in, or falsifications, of the foregoing statements and answers to questions. I am aware that should an investigation disclose such willful misrepresentations, falsifications or omissions, my application for the Citizen's Police academy will be rejected by the Jacksonville Police Department.

Signature of Applicant _____ Date _____

AUTHORITY TO RELEASE INFORMATION

Having made application with the Jacksonville Police Department and desiring that they be informed of my previous records and character. I hereby authorize and investigation into all records which may be of interest to them. This authorization includes, but is not limited to: school, military, and employment records, whether privileged or not. This authorization to furnish information is executed in consideration of the Jacksonville Police Department giving my application consideration for the Citizen Police Academy and shall serve as a release of liability to all parties furnishing such information to the Jacksonville Police Department. The applicants signature will need to be witnessed by the notary.

Signature: _____

Address: _____

City/Zip: _____

Date: _____

Sworn to and subscribed before me this _____ day of _____, 202__.

_____, My commission expires _____.
Notary Public

(seal)