



**Application for
Greater Madison County
Citizen Police Academy
Mondays 6:30-8:30
September 9th – November 11th**

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** (please circle)

Driver's License number: _____

3. Are you 18 years of age or older? **YES** or **NO** (please circle)

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

If yes, please explain: _____

5. How did you hear about the academy? _____

6. Have you ever applied to the academy before? **YES** or **NO** (please circle)

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 Citizen Police Academy. I also grant permission for the Kentucky State Police or other Law Enforcement Agency to verify the above information contained on this application and check for prior criminal history.

Signature of Applicant

Date