



St. Charles County Police Department

Citizen Police Academy Application Form

APPLICANTS MUST BE AT LEAST 21 YEARS OF AGE TO APPLY
INCOMPLETE AND/OR UNSIGNED APPLICATIONS WILL NOT BE CONSIDERED.
PLEASE PRINT OR TYPE.

NAME: _____ **DOB:** _____
Last First Middle

HOME ADDRESS: _____
Street

_____ City State Zip Code

EMAIL ADDRESS: _____

HOME PHONE: (____) _____ **ALTERNATE CONTACT:** (____) _____

DRIVERS LICENSE # _____ **STATE ISSUED** _____

SOCIAL SECURITY # _____

(For background check purposes)

EMPLOYER: _____ **OCCUPATION:** _____

BUSINESS ADDRESS: _____

BUSINESS PHONE: (____) _____ **POLO SHIRT SIZE:** _____
(Based on men sizing)

Have you ever been arrested, convicted or cited for an offense, including traffic offenses? Yes No

If you answered yes, please explain in detail including the date, charge, place and action taken as a result of the offense.

Have you ever attended a Citizen Police Academy? Yes No

If so, where? _____

Have you ever been employed at a law enforcement agency? Yes No

If so, where? _____

I hereby certify that each and every statement made on this form is true and complete and I understand that any misstatement or omission of information will subject me to disqualification. I also understand that the St. Charles County Police Department will conduct a background check (including driving and criminal history) on each applicant. The St. Charles County Police Department reserves the right to deny entry to the academy based on the findings of any background check. Further, I understand that the St. Charles County Police Department Citizen Police Academy does not certify or qualify citizens to perform any law enforcement services. By providing my electronic signature at the end of this form, I authorize the St. Charles County Police Department to conduct a background check for admission to the academy.

Applicant's Signature _____ Date _____