

GLADEWATER CITIZEN'S POLICE ACADEMY

APPLICATION FORM

By completing this application and providing the information below, I understand that I am requesting to participate in the Citizen's Police Academy sponsored by the Gladewater Police Department. As an applicant to attend this academy, I understand the police department may conduct a minimal background check for criminal history. The information provided will be kept strictly confidential and will be destroyed at the end of the academy or as soon as practical if denied attendance.

FULL NAME: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_ WORK NUMBER: \_\_\_\_\_

DRIVERS LICENSE NUMBER: \_\_\_\_\_ STATE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

EMAIL: \_\_\_\_\_

CITIZEN OF GLADEWATER?  YES  NO

EMPLOYED IN GLADEWATER?  YES  NO

HAVE YOU EVER BEEN CONVICTED OF A FELONY?  YES  NO

HAVE YOU EVER ATTENDED ANOTHER CITIZEN'S POLICE ACADEMY?  YES  NO

IF SO, WHERE AND WHEN? \_\_\_\_\_

By submitting the form and signing your name you agree to the following:

*I, the undersigned, as an applicant of the Citizen's Police Academy sponsored by the Gladewater Police Academy, agree to allow the police department to run a minimal background check on me. If selected, I also agree to attend as many of the class sessions as possible and understand that attendance and graduation from the academy does not qualify me to be or to act as a peace officer in the State of Texas. The police department has the right to accept or reject my application for any reason.*

\_\_\_\_\_

Signature of Applicant

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Date of Application