



**Cary Police Department
2021 Citizen's Police Academy Participant Application**

PERSONAL INFORMATION					
LAST NAME:	FIRST NAME:	MIDDLE:	AGE:	SEX:	D.O.B.: / /
HOME ADDRESS:		CITY:	ZIP CODE:	PLACE OF BIRTH:	
HOME PHONE:	CELL PHONE:			WORK PHONE:	
EMAIL ADDRESS:					
CRIMINAL HISTORY AND DRIVING RECORD					
ILLINOIS DRIVERS LICENSE NUMBER:			HAS YOUR LICENSE EVER BEEN SUSPENDED OR REVOKED? YES NO		
HAVE YOU EVER BEEN ARRESTED? YES NO IF YES, PLEASE EXPLAIN:					
HAVE YOU EVER BEEN CONVICTED OF A CRIME? YES NO IF YES, PLEASE EXPLAIN (Attach additional information if necessary):					
TRAFFIC CITATIONS AND TRAFFIC CRASHES FOR PAST 2 YEARS (Attach additional information if necessary):					

EMPLOYMENT/SCHOOL

CURRENT EMPLOYER/SCHOOL:		ADDRESS:	PHONE:
POSITION:	DIRECT SUPERVISOR:	DATES:	TO
DUTIES:		MAY WE CONTACT YOUR EMPLOYER?	

MILITARY SERVICE

BRANCH OF SERVICE:	RANK:	PAY GRADE:
DATES OF ACTIVE SERVICE:	TYPE OF DISCHARGE:	
TO		

REFERENCES

*** PLEASE FURNISH THREE (3) PERSONAL REFERENCES. PLEASE DO NOT LIST RELATIVES, AND ONLY LIST PEOPLE WHO HAVE KNOWN YOU FOR A MINIMUM OF TWO (2) YEARS. PLEASE PROVIDE ALL INFORMATION REQUESTED.**

NAME:	YEARS ACQUAINTED:		
HOME PHONE:	CELL PHONE:	EMAIL:	
ADDRESS:			
NAME:	YEARS ACQUAINTED:		
HOME PHONE:	CELL PHONE:	EMAIL:	
ADDRESS:			
NAME:	YEARS ACQUAINTED:		
HOME PHONE:	CELL PHONE:	EMAIL:	
ADDRESS:			

How did you hear about the Citizen Police Academy?

Why do you want to participate in the Citizen Police Academy?

All accepted applicants will receive an embroidered Citizen Police Academy polo shirt to wear during classes. To ensure polos are ordered correctly, please select a shirt size:

- Men's Small Men's Medium Men's Large Men's XL Men's 2XL
- Women's Small Women's Medium Women's Large Women's XL Women's 2XL

Certification

I agree to submit to the Department's selection process and understand that I must successfully complete this process before being given final consideration for acceptance into the Citizen Police Academy.

I hereby authorize my employer, educational institutions, and any other persons or individuals to furnish any information concerning me, whether or not it is on their records, and I release them and their companies from any liability whatsoever. I certify that all statements given in this application are true and correct. I realize that falsification or misrepresentation on this or any other record may result in my not being accepted to the Citizen Police Academy.

I have read and understand the above:

(Printed Name)

(Date)

(Signature)

(For Official Use Only)

Accepted _____

Denied _____