

TALLAHASSEE POLICE DEPARTMENT'S CITIZENS' POLICE ACADEMY

APPLICATION FOR ENROLLMENT

(Please type or print clearly)

| NAME (last, first, MI) | | | |
|--|---------------------|---------|---------|
| ADDRESS: | | | |
| (STREET) | (CITY) | (STATE) | _ (ZIP) |
| PHONE NUMBER: | | | |
| (HOME) | (WORK) | | |
| DO YOU HAVE ACCESS TO E-MAIL? | (circle one) YES NO | | |
| E-MAIL ADDRESS (please print clearly | y): | | |
| PLACE OF EMPLOYMENT: | | | |
| FORMAL EDUCATION (# OF YEARS): | : | | |
| MARITAL STATUS: | | | |
| NOTE: A criminal background recor Citizens' Police Academy. Th this check. | | _ | |
| DATE OF BIRTH: | | | |
| RACE: | | | |
| GENDER: | | | |
| SOCIAL SECURITY NUMBER: | | | |

QUESTIONNAIRE FOR APPLICANTS

| 1) | Have you ever been a | rrested, anywhere, fo | or a felony or misc | lemeanor? | YES | NO |
|--|---|-------------------------------------|-----------------------|----------------------|--------------------|------|
| 2) | If the answer to #1 is y | es, provide details. | If not, proceed to | question #3 | . | |
| | | | | | | |
| 3) | Do you have any <u>seve</u> the activities associate | | | event you fro YES | om engagin NO | g in |
| Ρle | Can you commit to at lease note that students cademy. If you have other | missing more than or | ne (1) night of instr | uction will b | e dropped f | |
| 5) | Why do you want to pa | articipate in the Citize | ens' Police Acade | my? | | |
| | Have you ever had an perience positive or ne | | llahassee Police I | Department | ? If so, was | your |
| 7) | If you are not selected interested in attending | | | | y, would you NO | ı be |
| 8) | Have you applied for a When? | previous CPA and r | not been accepted | l? YES | NO | |
| 9) | How did you hear abo | ut the Tallahassee P | olice Department' | s Citizens' F | Police Acad | emy? |
| Please review your answers and read the statement below before signing your application. I hereby certify that there are no willful misrepresentations, omissions, or falsifications in the foregoing statement and answers to questions. I understand that any omission or false statement on this application shall be sufficient cause for rejection of enrollment or dismissal from the Tallahassee Police Department's Citizens' Police Academy. I understand that participation in this program is not to train citizens to be police officers. Rather, the goal and purpose of this program is to educate citizens regarding the purpose, rationale and context of police procedures. I acknowledge that as part of acceptance to this program, I will be required to attend at least 8 of the 9 classes. Failure to attend will be cause for dismissal from graduating. I will abide by all rules and regulations set forth by the Tallahassee Police Department and the City of Tallahassee. I will provide my own transportation when required. I further understand that the Tallahassee Police Department will be conducting a thorough background investigation | | | | | | |
| Αp | oplicant Signature: | | | Date: | | |
| RI | | Community Rela Callahassee Polic | | | | |

Tallahassee Police
Department 234 E. 7th Avenue
Tallahassee, FL 32303