

**Angleton Junior
Citizen's Police Academy Application**

Date: _____ *Location:* _____

Name: _____ *D.O.B.:* _____

Address: _____ *City:* _____ *Zip:* _____

Home Phone: _____ *Work Phone:* _____ *Cell Phone:* _____

Grade and School: _____ *Email:* _____

Social Security #: _____ *Place of Birth:* _____

Employer: _____ *Occupation:* _____

Referred by: _____ *T-Shirt Size:* _____

Reason for attending the Junior Citizen Police Academy: _____

What are your expectations: _____

How did you first learn of the Junior Citizen Police Academy? _____

Have you ever been arrested and convicted of a crime? (yes or no) _____

What type of crime? _____

If yes, please explain: (when and where) _____

Do you have any medical allergies that we need to be aware of (I.e. food, medications, etc.)?

Emergency contact information:

Name: _____ *Relationship:* _____ *Phone :* _____

Primary physician: _____ *Phone:* _____

Address: _____

Do you have any **SEVERE** physical limitations which would prevent you from engaging in the activities associated with the Junior Citizens Police Academy? YES NO

All information will remain confidential. For departmental use only.

Please provide two references:

1. Name: _____ Phone: _____

Address: _____ City: _____

2. Name: _____ Phone: _____

Address: _____ City: _____

As an applicant you fully acknowledge that the Angleton Police Department's office will conduct a background check and the Chief has the right of refusal based on the findings of this check. You also acknowledge that all findings are for departmental use only and this information will remain confidential.

Signature: _____ Date: _____

Witness: _____ Date: _____

Please contact or forward information to:

Asst. Chief Katherine Davis
Administration Division
104 Cannan Dr.
Angleton, Texas 77515
(979)-849-2383
Fax: (979)-849-2387
Email: kdavis@angletonpd.net

Or

Cpl. Cameron Parsons
Training Division
104 Cannan Dr.
Angleton, Texas 77515
(979)-849-2383
Fax (979)-849-2387
Email: cparsons@angletonpd.net