

CITY OF ELLISVILLE CITIZENS POLICE ACADEMY APPLICATION

LEGAL NAME (LAST, FIRST, MI)	PREFERRED NAME (IF DIFFERENT)	EMAIL ADDRESS
ADDRESS	CITY/STATE/ZIP CODE	PHONE NUMBER(S) HOME CELL
ARE YOU A RESIDENT OF THE CITY OF ELLISVILLE? <input type="checkbox"/> YES <input type="checkbox"/> NO		OCCUPATION
DRIVER'S LICENSE NUMBER	GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	DATE OF BIRTH
HAVE YOU EVER BEEN CONVICTED OF A FELONY? <input type="checkbox"/> NO <input type="checkbox"/> YES, IF SO PLEASE EXPLAIN		
WHY ARE YOU INTERESTED IN ATTENDING THE CITIZENS POLICE ACADEMY?		
WHAT WOULD YOU LIKE TO LEARN DURING THIS TRAINING?		
DO YOU HAVE ANY EXPERIENCE WITH LAW ENFORCEMENT?		
<p>THE ELLISVILLE POLICE DEPARTMENT'S CITIZENS POLICE ACADEMY WILL TAKE PLACE ON WEDNESDAY EVENINGS FROM 6-8 P.M. BEGINNING SEPTEMBER 21, 2016. THROUGH THIS EIGHT WEEK PROGRAM, PARTICIPANTS WILL LEARN ABOUT A VARIETY OF TOPICS SUCH AS CRIMINAL LAW, CRIME SCENE INVESTIGATION, AND PATROL TECHNIQUES. THE ACADEMY IS OPEN TO ALL ELLISVILLE RESIDENTS, AND THOSE WHO WORK IN ELLISVILLE, WHO ARE AT LEAST 18 YEARS OF AGE WITH NO FELONY CONVICTIONS. THE ACADEMY IS LIMITED TO 25 PARTICIPANTS. THIS TRAINING IS NOT INTENDED TO CERTIFY AN INDIVIDUAL TO PERFORM DUTIES AS A LAW ENFORCEMENT OFFICER.</p>		
<p>THE CITY OF ELLISVILLE IS AN EQUAL OPPORTUNITY EMPLOYER AND APPLIES THOSE SAME PRINCIPLES TO SELECTION OF PARTICIPANTS IN THE CITIZENS POLICE ACADEMY. SELECTION IS DONE WITHOUT REGARD TO RACE, RELIGION, COLOR, NATIONAL ORIGIN, SEX, POLITICAL AFFILIATION OR DISABILITY.</p>		
<p>I CERTIFY THAT ALL STATEMENTS MADE ON THIS APPLICATION ARE TRUE TO THE BEST OF MY KNOWLEDGE. I HEREBY AUTHORIZE EMPLOYEES OF THE CITY OF ELLISVILLE POLICE DEPARTMENT TO CONDUCT A CRIMINAL HISTORY BACKGROUND CHECK TO DETERMINE MY SUITABILITY FOR THIS PROGRAM.</p>		
SIGNATURE: _____		DATE: _____