



CITIZEN POLICE ACADEMY APPLICATION



FULL NAME: _____ DATE OF BIRTH: _____

ADDRESS: _____
Street City Zip Code

HOME PHONE: _____ WORK PHONE: _____

WORK ADDRESS: _____
Street City Zip Code

CA DRIVER'S LICENSE NUMBER: _____

Have you ever been arrested? _____ If yes, what for and when? _____

How did you hear about the Citizen Police Academy? _____

Do you have any relatives in law enforcement? _____

<p>Have you ever applied to the City of Tustin before? <input type="checkbox"/> Y* <input type="checkbox"/> N</p> <p>Do you have any relatives employed by the City? <input type="checkbox"/> <input type="checkbox"/></p> <p>Are you a veteran of the U.S. Military Service? <input type="checkbox"/> <input type="checkbox"/></p>	<p>Have you ever been employed by the City of Tustin? <input type="checkbox"/> Y* <input type="checkbox"/> N</p> <p>Have you ever been convicted of a felony? <input type="checkbox"/> <input type="checkbox"/></p> <p>Are you currently on Active Reserve Military Status? <input type="checkbox"/> <input type="checkbox"/></p>
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***If you answered "yes" to any of the above questions, please explain below, or on a separate sheet of paper if necessary.**

EDUCATION INFORMATION

COLLEGES, BUSINESS OR TRADE SCHOOLS: Print Name & City	Dates		# of Units Quarter or Semester	Major Area of Study	Degree Obtained Date Confirmed
	From	To			
List any other job-related training or professional licenses held					



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WHAT IS YOUR CURRENT OCCUPATION? _____

WHY ARE YOU INTERESTED IN THE CITIZENS ACADEMY? _____

WHAT ARE YOUR GOALS IN THE COMMUNITY UPON GRADUATION? (OPTIONAL QUESTION)

PLEASE PROVIDE YOUR EMAIL ADDRESS:
