Citizens Police Academy Application

March 14th thru May 9th Classes held Thursdays 6:30pm - 8:30pm

Note: Class size is limited and applications will be processed on a first come basis.

PLEASE **PRINT** ALL INFORMATION CLEARLY:

Last Name:	First Name:	MI:Nickname:
Address:		
City:	State:	Zip Code:
Home phone:_()	Cell or Alt pho	one:_()
	the class will be done through e	mail unless other wise requested.
* Date of Birth: Mo:	Day:Year:	SEX: M F (circle one)
* Drivers license number: #		**State:
Emergency contact info:		
Name:	Relationship:	PH #
How did you learn about the	Citizens Police Academy? (Check C	ne) Previous Attendees:
		Other:
	d for anything other than a traffi	
If yes: Where		Date
Type of offense:		·
	ust attend a minimum of six (6) of thation. Y N (circle one)	ne scheduled classes in order to receive
Police Academy (CPA) to make any	investigation of my personal history dee nd that attending the Georgetown Citizer	and complete. I hereby authorize the Citizens med necessary for consideration in attending this ns Police Academy will in no way authorize me to
Signature:	Da	ate:

NOTE: Do not return via email. No electronic application will be accepted.

Please return this application by **U.S. mail** or **in person** to:

Citizens Police Academy - Atten: Volunteer Services

Georgetown Police Dept.

3500 DB Wood Rd.

Georgetown, Texas 78628

(512) 930-2747