



# MOBILE CITIZENS POLICE ACADEMY

*Forming a Stronger Union Through Enlightenment and Cooperation*

## Application (Please Print)

Name: \_\_\_\_\_ Social Security# \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Race: \_\_\_\_\_ Sex: \_\_\_\_\_ Driver's License# \_\_\_\_\_

Home Telephone# \_\_\_\_\_ Cell Phone# \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation/Title: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Do you live in Mobile County or work in the City of Mobile? Yes \_\_\_\_\_ No \_\_\_\_\_

In your own words, tell why you want to attend the Mobile Citizens Academy \_\_\_\_\_

How did you find out about the Mobile Citizens Academy? \_\_\_\_\_

List two (2) family members or close friends that we can contact in case of an emergency

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Telephone# \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Telephone# \_\_\_\_\_

Have you ever attended a Mobile Citizens Academy before? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been arrested/convicted of a crime? Yes \_\_\_\_\_ No \_\_\_\_\_ Explain below

The Mobile Police Department will conduct a background criminal history check on all applicants who apply to attend the Citizens Police Academy for the purpose of determining prior arrest and convictions. By your signature below, you are authorizing the Mobile Police Department to conduct this investigation. Any information found to be untruthful will be grounds for immediate refusal of this course. PLEASE RETURN COMPLETED APPLCIATION TO: MOBILE POLICE ACADEMY, 1251 VIGINIA STREET MOBILE, AL 36604.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_