



Cornelius Police Department

21440 Catawba Avenue Cornelius, NC 28031 (704)-892-1363

Name: _____
Last, First, Middle

DOB: _____

Address: _____
Street City State Zip

Contact Information

Phone Numbers: _____
Cell Home

Email Address: _____

Neighborhood: _____

Driver's License Number & State: _____ Sex: _____ Race: _____

Employer: _____

Background Information:

	<u>Circle Answer</u>	
Have you ever been charged with a felony offense?	Yes	No
Have you been charged with a misdemeanor within the last three years?	Yes	No
Are you currently on parole or probation?	Yes	No

If you answered yes to any of the above questions please explain in detail:

Background checks are conducted on all applicants who are selected to participate in this program. False statements will be grounds for immediate dismissal.

List any medical condition, allergies, food allergies and/or medications you feel we may need to know about:

Emergency Contact: _____
Name Relationship

Phone Numbers: _____
Home Cell

Briefly explain why you would like to attend our Citizens Police Academy:

Agreement:

By submitting this application, I acknowledge that I have completed the above information completely and accurately. I understand and give my expressed permission for the Cornelius Police Department to conduct a background investigation to determine my suitability for admission to this program. I understand some classes may include minor physical activities and that I may choose not to participate if I feel I am unable to perform the activity safely; however, it is my responsibility to notify the instructor prior to the activity.

By signing this application, you are confirming that you have read, understand, and accept the above agreement.

Signature: _____

Date: _____