

St. George Police Department
Citizens Academy Participant Application
Session #17
Feb. 21st-Apr. 17th 2012
Tues. 6pm-8pm & Thurs. 6pm-8pm

Name: _____ Date of Birth _____
Home Address: _____
Mailing Address (if different): _____
Home Phone: _____ Work Phone: _____
E-mail: _____
Driver License #: _____ Social Security #: _____

Have you ever been arrested or convicted of any offense other than a minor traffic violation?

NO _____

Yes _____

_____ (Use the back of this sheet if necessary to explain)

I hereby affirm that all information provided on this application is true and correct to the best of my knowledge. I also authorize the St. George Police department to validate any and all information provided through resources available which may include, but are not limited to, the Department of Motor Vehicles and the Bureau of Criminal Identification.

Signature

Date

For Office Use Only

Application Received by/date: _____ Background check completed by/date: _____

Application status: _____ Session: _____