



Application for Participation
Snowflake-Taylor PD Citizen's Academy

Date: _____

Name: _____ Home Phone: _____

Cell Phone: _____ Email Address: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Employer: _____ Position: _____

Work Phone: _____ Business Address: _____

Drivers License Number/State: _____

Date of Birth: _____ Circle one: MALE / FEMALE

Organizations in which you are involved. Awards or recognitions received:

Why do you wish to attend the Citizen's Academy?

How did you hear about our Citizen's Academy?

Have you ever been arrested/convicted of a crime? If yes, please explain:

