



Citizen's Police Academy Application

Full Legal Name: _____

Date of Birth: _____

Driver's License Number: _____

Current Address: _____

Telephone: _____

Email Address: _____

Employer and Occupation: _____

Work Phone: _____

Emergency Contact's Name: _____

Relationship: _____

Emergency Contact's Cell Phone: _____

Shirt Size : _____

Have you been arrested for a crime other than a traffic offense? Y or N

Please tell us why you are interested in attending the Morehead Citizens Police Academy? _____

I hereby certify that there are no willful falsifications, omissions or misrepresentations in foregoing statements and answers to questions. I understand that any omission or false statement on this application shall be sufficient cause for rejection for enrollment or dismissal from the Morehead Citizens Police Academy. I also grant permission for the Morehead Police Department to verify the above information contained on this application and check for prior criminal history.

Signature: _____ **Date:** _____