

**CITIZEN'S SHERIFF ACADEMY
APPLICATION**

Date of Application: _____ Email _____

Name: _____ Date of Birth: _____
(First) (MI) (Last)

Address: _____

City, State ZIP: _____

Home Phone #: _____ Driver License #: _____

Have you ever been arrested for any offense other than traffic? _____

If yes, what for? _____ When: _____ Where: _____

What experience have you had with law enforcement: _____

Please check one: Positive Negative

Please briefly explain:

Please briefly explain your interest in the citizen's academy:

Person to be contacted in case of emergency during your attendant at the academy:

Name: _____ Phone#: _____

Address: _____

Relationship: _____

Liability Waiver

I hereby certify that the information contained in this application is true and complete to the best of my knowledge. You are hereby authorized to make any investigation of my personnel history deemed necessary for consideration to attend the Citizen's Sheriff Academy.

Signature: _____ Date: _____

PLEASE RETURN TO THE SHERIFF'S OFFICE

You can mail the application to 1700 Hwy 21 West Bryan, Texas, 77803

Fax to (979)361-4999, or email to SGaron@brazoscountytexas.gov