

**2015 CITIZEN'S SHERIFF ACADEMY
APPLICATION**

Date of Application: _____

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

Email _____

Address: _____

City, State ZIP: _____

Work Phone: _____ Home Phone: _____

Soc Sec #: _____ Driver License #: _____

Employer: _____ Occupation: _____

Employer's Address: _____
(Street) (City) (State) (ZIP)

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

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

Please, briefly list or describe any civic activities/organization you are involved in:

What experience have you had with law enforcement: _____
Please circle one: Positive Negative

Please briefly explain: _____

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

What do you expect to gain from attending this academy? _____

Will you be able to attend all, or at least most, of the class sessions? (Every Tuesday from August 25th , through November 10th) ____ Yes ____ No

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 personal history deemed necessary for consideration to attend the Citizen's Sheriff Academy.

Signature: _____ Date: _____

PLEASE RETURN TO THE SHERIFF'S OFFICE BY August 21, 2015
please Mail or fax to 1700 Hwy 21W Bryan texas 77803 or 979/3614905
Or drop it by our office in person