



Green Bay Police Department Citizens' Academy Application

Name: _____
Last First Middle

Date of Birth: _____

Email address: _____

Address: _____
Street Apt # City State Zip Code

Phone Number: Home: _____ Work: _____

In case of emergency contact: _____
Name Relationship Phone #

Driver License Number: _____ State: _____

Class: _____ Expiration Date: _____

Is your driver's license valid? Yes _____ No _____

Have you ever been arrested for anything other than a traffic offense? Yes _____ No _____

If "Yes" was answered on above question, explain where, when and disposition.

Place of Employment: _____

Address: _____
Street City State Zip Code

I certify that all statements made on this application are true and complete. I authorize any individual, company, organization or institution to release any and all information concerning statements made by me on this application, and do hereby release all parties and individuals connected therewith from all liabilities for any damages whatsoever incurred in furnishing such information. I agree and understand that any deliberate misstatement or omission of material facts may disqualify me to attend the Citizens' Police Academy. My signature below acknowledges my understanding and agreement with the material provided.

Signature

Date