



Rancho Cordova Police Department Citizens Academy Application

Applicant's Name: (Last) (First) (M.I.)

Address:

City: State: Zip: Home Phone:

Employer: Occupation:

Employer City: State: Zip: Work Phone:

Cell Phone: Email Address:

Driver's License #: State Licensed: Date of Birth: Race:

Male Female

In the event of an emergency please contact:

Name: Phone Number:

Address: Relationship:

How did you hear about our Citizens Academy?

Why do you want to attend?

Criminal History:

Have you ever been arrested and/ or convicted of a crime? No Yes

If yes, please explain:

PERMISSION TO CONDUCT A BACKGROUND INVESTIGATION

As an applicant for the Rancho Cordova Police Department Citizens Academy, I hereby authorize the Rancho Cordova Police Department to conduct a criminal history background investigation. I understand that this criminal history check is being conducted due to the nature of the classes at the Citizens Academy.

I understand that all available police and criminal records will be checked and that the information will be used in determining eligibility of applicants for the Citizens Academy. All information is to remain confidential as required by the State of California and federal statutes.

I understand that space is limited for students to participate in the Citizens Academy. Therefore, I agree to attend all of the scheduled sessions. Additionally, I agree to arrive promptly, and to complete and return the evaluation forms provided for each session.

Signature of Applicant: Date:

Office Use Only

Date Received: Background Completed: Accepted:

Notice Sent: Other: