



# UNIVERSITY CITY POLICE DEPARTMENT



## CITIZEN'S POLICE ACADEMY APPLICATION

### CLASS 23-01

PLEASE TYPE OR PRINT

NAME: \_\_\_\_\_

Last

First

Middle

SOCIAL SECURITY NUMBER: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

PRESENT ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_

ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

WORK PHONE: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

EMAIL: \_\_\_\_\_

#### **PLEASE ANSWER THE FOLLOWING QUESTIONS BY CIRCLING "YES" OR "NO"**

1. Are you at least 18 years of age?	YES	NO
2. Have you ever been arrested for a misdemeanor or felony?	YES	NO
3. Have you ever been convicted of a misdemeanor or felony?	YES	NO

**POLICE RECORD CHECKS WILL BE COMPLETED ON ALL APPLICANTS.**

Citizen's Police Academy applicants will be notified by phone and/or mail to confirm registration.

Contact Captain Fredrick Lemons at 314-505-8661 or email [flemons@ucitymo.org](mailto:flemons@ucitymo.org) to register or for additional information.

All applicants must sign this application to be considered a candidate for the Citizen's Police Academy. This signature gives your authorization for a police record check.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_