



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 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: _____