



2020 CITIZEN'S ACADEMY APPLICATION



PLEASE TYPE OR PRINT CLEARLY *Academy Starts 03/05/2020*

First Name | M.I. | Last Name

Address

City | Email

Zip | Date of Birth | Phone

Employer

Job title / Description

Current student / location

What community groups or activities are you active in?

What do you hope to achieve in the Citizen's Academy?

Do you anticipate being able to attend all eleven Thursday night classes? If not, please explain:

Do you have an interest in being a Volunteer in police Service? Yes_____ No_____

Have you ever been arrested? Yes_____ No_____

Have you ever participated in a Citizens Academy before? If yes, where & when.

I hereby certify that all information contained in this application is true and complete to the best of my knowledge.

_____/_____
**SIGNATURE DATE

** By signing this form, you agree to a local background check.

Email, Mail, or drop off the completed application by 03/01/2020

Attention: Sergeant Jesse James Smith
(jesse.smith@sheboygancounty.com)
Sheboygan County Sheriff's Office
525 North 6th Street
Sheboygan, WI 53081

You will be notified if you've been accepted prior to the start of the academy.