

**Athens-Clarke County Police Department**

**Citizen Police Academy Application**

PLEASE PRINT-NO CURSIVE

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

**DATE:** \_\_\_\_\_ **PHONE: W:** \_\_\_\_\_ **H/C:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

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

**EMPLOYER/OCCUPATION:** \_\_\_\_\_

**HAVE YOU PREVIOUSLY ATTENDED A CITIZEN POLICE ACADEMY? YES NO**

**IF YES, WHEN AND WHERE DID YOU ATTEND?** \_\_\_\_\_

*(Preference is given to those who have not previously attended the ACCPD Academy.)*

**WHY DO YOU WISH TO ATTEND THE CITIZEN POLICE ACADEMY?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**HAVE YOU EVER BEEN ARRESTED/CONVICTED OF A CRIME?**

*(Arrest and/or conviction does not automatically disqualify you from the academy.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PROVIDE TWO CHARACTER REFERENCES: NAME, PHONE NUMBER, RELATIONSHIP**

1)

\_\_\_\_\_  
\_\_\_\_\_

2)

**Completed applications must be delivered**

**-electronically, by mail or in person to:**

Lesley Moore and Julita Sanders, NSO's  
Athens-Clarke County Police Department  
3035 Lexington Road  
Athens, GA 30605  
762-400-7159  
762-400-7160  
Lesley.Moore@accgov.com  
Julita.Sanders@accgov.com

