



Fort Pierce Police Department

Citizen Police Academy

APPLICANT INFORMATION
(Please print or type)



NAME: _____

ADDRESS: _____

CITY _____ **STATE** _____ **ZIP** _____ **PHONE NUMBER** _____

RACE: _____ **SEX:** _____ **DATE OF BIRTH:** _____ **ADULT POLO SHIRT SIZE** _____

SPECIAL NEEDS/REASONABLE ACCOMMODATION:

Please indicate any special needs you may have due to an ADA disability:

PLACE OF EMPLOMENT: _____

List any organizations in which you are involved:

Please tell us how you found out about the program (circle all that apply):

Through a Friend (name of friend) _____ **Magazine (name of mag)** _____

TV (name of station) _____ **Radio (name of station)** _____

Newspaper (name of paper) _____ **Other** _____

CITIZEN POLICE ACADEMY APPLICATION/ATTENDANCE RULES

1. Incomplete applications will **NOT** be considered.
2. Persons **under the age of 18** are not accepted into the Citizen Police Academy.
3. Participants are required to wear appropriate attire and their identification badges (provided at the first session) during all training activities. Identification badges will be returned to the Training Staff after graduation.
4. Participants are required to conduct themselves in a professional manner at all times. Failure to comply may lead to dismissal.
5. Participants are not permitted to carry weapons.
6. Accepted participants will be notified by mail or phone. Class size is limited. Priority will be given to persons living and/or working within the City of Fort Pierce FPRA. Participation is permitted only for those who have not previously attended this Citizen Police Academy.
7. Participants must attend at least 5 out of the 6 sessions in order to receive a graduation certificate

APPLICANT SIGNATURE: _____ **DATE:** _____

Return Application to:
Fort Pierce Police Department
Officer James Cozine
920 S US1, Fort Pierce, FL 34954
Phone: **772-370-0065** or Fax to: **772-464-9801**