Citizen Police Academy Application

Name: _____
Last Name/Maiden & Previous First Name Middle

Address: _____
Street City/State Zip

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Age: _____ Date of Birth: _____ DL #: _____ SSN #: _____

Email Address: _____ Gender: Male ☐ Female ☐

Place of Employment: _____

Employer Address: _____
Street City/State Zip

In the event of an emergency, please list the name and phone number of a relative or close associate that can be contacted:

Name: _____ Relationship: _____ Phone #: _____

Have you ever been convicted of a crime? Yes ☐ No ☐

If yes, explain:

_____

Why are you interested in attending the Citizen Police Academy? _____

Memberships in Community Organizations? If yes, please list: _____

Due February 1st

I certify that all statements made on this application are true and complete. I understand that I may be rejected for submitting incomplete or false information. I hereby authorize the employees of the Enid Police Department to make an examination of the above information for purpose of evaluating my application. **IMPORTANT: This training is not designed to certify citizens to perform law enforcement services. The purpose is to enhance community relations and to provide citizens with insights into the criminal justice system.**

Signature: _____

Date: _____

Please Compete this form and return it to:
Enid Police Department
Attn: Training Division
301 W. Owen K. Garriott Road
Enid, Oklahoma 73701

Privacy Act Notice: The Police Department's application form for the Citizen Police Academy requests your social security number. Disclosing your social security number on these forms is voluntary. The request is made pursuant to the Police Department's practice of requiring program participants to undergo a criminal history record check and using their social security numbers along with other identifying information to conduct criminal history record checks on them. This information is necessary for the Police Department to obtain accurate criminal history record information and will be used only for that purpose. Signing above indicates that you have read and understand that your social security number will be used by the Police Department to obtain access to your criminal history record information.

Requirements of eligibility in the Citizens Police Academy

1. Must be 18 or Older
2. Must live or work in the City of Enid Community
3. Be able to pass a criminal background check
4. Cannot have a protective order against you
5. No felony convictions

Rules for Participating in the Citizens Police Academy include, but are not limited to:

1. Mandatory attendance to the first day of class or your application is rescinded
2. Attend at least eleven (11) of the thirteen (13) sessions.
3. Participants are not permitted to carry weapons
4. Participants are required to wear appropriate attire and their identification badges provided.

You may contact the Enid Police Department Training/Community Relations Division, Lt. Justin Hodges or Sgt. Kevin Bezdicek at 580-242-7000 extension 7034 or 7076 or email them at jhodges@enid.org or kbezdicek@enid.org.

The Citizens Police Academy class is not a training class, but is an exciting information class, a behind- the-scenes look at the Enid Police Department. Persons interested in pursuing a career as a law enforcement officer with the City of Enid should contact the Human Resources Department at 580-234-0400 for job announcements or the Enid Police Department website http://www.enid.org/police. Applications due February 1st.

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