



Citizens' Police Academy Application (Please Print or Type)

Name:

Date of Birth

Residence Address:

Business Name: (if applicable)

Business Address:

Home Telephone:

Business Telephone:

Occupation & Job Title:

Drivers License Number and State:

Referred by:

Have you ever been arrested for any offense other than a traffic violation?

No

Yes

Describe in your own words why you want to be in the Citizen's Police Academy.

Have you ever attended a Citizen's Police Academy?

Yes

No

If so, when and where?

I hereby authorize the Fairbanks Police Department to make an examination of police and criminal history records for the purpose of evaluating my application.

Signature:

Print Name:

Return to:
Fairbanks Police Department
911 Cushman St.
Fairbanks, AK 99701