Memphis Police Department
Citizen Police Academy
Application for Enrollment

Place an X by the Police Station you plan to attend for CPA Classes:

Old Allen Station		**Raines Station**	____	**Mt. Moriah Station**	____
Union Station	____	**Tillman Station**	____	**South Main Station**	____
Airways Station	____	**Ridgeway Station**	____	**Appling Farms Station**	____

Name:_____**DOB:**_____**Age:** _____
Last name, First name Other Names- if applicable

Social Security Number:_____**Driver's License/ State ID Number/State:** _____

Sex:_____**Race:**_____**Email Address:** _____

Home Address:_____**City:**_____**State:**_____**Zip:**_____

Telephone #: Home ( )_____**Cell ( )**_____**Work ( )** _____

Employer's Name:_____**Job Title:** _____

Employer's Address:_____**City:**_____**State:**_____**Zip:**_____

Supervisor's Name:_____**Contact Number:** _____

Criminal background checks will be conducted as a requirement for CPA enrollment.
Do you consent to being subject to a criminal background check? Yes_____ No___
Have you ever been the victim of a crime? Yes _____ No___
Have you ever been convicted of a crime? Yes _____ No _____
If yes, indicate: State_____**Date**_____**Charges**_____

Briefly state why you want to receive this Citizens Police Academy Training:

_____

_____

NOTE: All applications must be returned to your CPA Police Station's Neighborhood Watch Coordinator. Applications will not be accepted or processed after training begins. Qualified applicants will be selected to attend class on a first come basis. Submitting an application does not guarantee acceptance into the class.

If selected to become a participant in the Memphis Police Department's Citizen's Police Academy, I do hereby agree to attend all sessions as scheduled. I further agree to use the information obtained from the CPA experience to help support and assist law enforcement efforts throughout the community.

_____ _____
Applicant Signature **Date**

***Office Use Only: Date Received*_____*Initials*_____ *Date Approved*_____*/Rejected*_____*Initials*____**