

CITIZEN POLICE ACADEMY  
Lake Jackson Police Department  
c/o Rick Wright  
5A Oak Drive  
Lake Jackson, Texas 77566

Name: \_\_\_\_\_ Mr. Mrs. Ms.

Home Address: \_\_\_\_\_  
Street City State

Occupation: \_\_\_\_\_ Business Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Drivers License #: \_\_\_\_\_ State: \_\_\_\_\_

Have you ever been arrested or convicted of a crime? (Yes) (No) If so,  
Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you previously attended a Citizen Police Academy? (Yes) (No) If so,  
where? \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Why do you wish to attend the Citizen Police  
Academy: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Give name, address, and phone number of two character references:

1. \_\_\_\_\_

2. \_\_\_\_\_

In consideration of my application to attend the Citizen Police Academy, I give the Lake Jackson Police Department permission to check my personal background, references and to conduct other background checks as necessary to insure the integrity of the class. The above information is correct to the best of my knowledge.

\_\_\_\_\_  
Signature of Applicant Date