



Belmont Police Department Citizens Police Academy

Citizens Academy Application (Applicants are subject to a background check)

Name _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Drivers License # _____

Social Security # _____

Date of Birth _____

Employer _____

Occupation _____

Employer Address _____ City _____ State _____ Zip _____

Work Phone _____

List Group Affiliations _____

How did you hear about the Academy? _____

Why do you want to attend? _____

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

If yes, explain briefly (charge, date, disposition) _____

Applications must be submitted to the Belmont Police Department by April 24th