

Newark Police Department
Citizen Police Academy
Enrollment Application

Full Name: _____ Date: _____

All Other Names Used: _____

Home Address: _____

Home Phone: _____ Work Phone: _____

Email Address: _____

Employer: _____ Occupation: _____

Work Address: _____

Drivers License: _____ Date of Birth: _____

Do you have any relatives in law enforcement? _____

Have you ever worked or applied for employment with the City of Newark? _____

Briefly explain why you would like to participate in the Citizen's Police Academy? _____

How did you hear about the Academy? _____

Have you ever been convicted of a felony? ' Yes ' No

Have you ever been arrested? ' Yes ' No

If yes, please explain (include dates) _____

Are you a veteran of the U.S. Military? ' Yes ' No

Are you currently on Active Reserve Military Status? ' Yes ' No

High School Graduate _____ (School and Year) GED _____ (Year)

Colleges Attended: _____ Attendance Dates _____

_____ Attendance Dates _____

Major Area of Study _____ Highest Degree Obtained _____

List any other related training or professional licenses held _____

Eligibility Requirements

Applicants for the Citizen Academy must meet the following criteria:

- Live or work in the City of Newark
- Be at least 21 years of age
- Have no felony convictions
- Have no misdemeanor convictions within three years prior to application

Any requirement may be waived or modified upon review and approval of Chief of Police

I understand that by participating in the Newark Citizen Police Academy, I may have access to facilities, areas, and equipment not generally available to the public. Therefore, I am providing the above information and I am authorizing the Newark Police Department to verify that I am not the subject of an on-going criminal investigation, am not involved in any civil litigation with the City of Newark, and I do not have any felony convictions or have any misdemeanor convictions within the last three years. I realize that a background and criminal history check will be conducted on me.

I am aware that I will be issued an identification badge for the purpose of entering the City facilities during the 10-week academy. I understand that this identification badge cannot be used for any other purpose.

The undersigned, for myself and my heirs, hereby waives any and all claims against the City of Newark, its elected and appointed officials, officers, agents, and employees (“City”) for any personal injury, including death, or any personal property damage that may result from my participation in the City of Newark Police Department’s Citizen Police Academy, in which I agree to participate.

By signing below I certify that I believe I do not have any medical conditions which would preclude me from participating in this program.

Signature: _____

Date: _____

Return completed application to:

**NEWARK POLICE DEPARTMENT
CITIZEN POLICE ACADEMY**

37101 Newark Boulevard
Newark, CA 94560

For additional information, please call:
(510) 578-4352

FOR OFFICE USE ONLY

Date Received	Warrant Check	CI & I Check	Corpus Check	Records Check	Class #