



**PFLUGERVILLE POLICE DEPARTMENT
CITIZENS POLICE ACADEMY
APPLICATION FOR ENROLLMENT**



PLEASE COMPLETE THIS FORM BY PRINTING CLEARLY

All applications must be completed and returned to the Pflugerville Police Department in order to be considered. There are only 25 openings in each Academy class. Acceptance is on a first-come, first-serve basis. An eligibility list will be established for last minute cancellations and openings in future academy classes.

NAME (LAST, FIRST, MIDDLE)		DATE OF BIRTH	DATE OF APPLICATION
HOME ADDRESS		ZIP CODE	HOME PHONE
MAILING ADDRESS		ZIP CODE	CELL PHONE
EMAIL ADDRESS			
PLACE OF EMPLOYMENT / NAME OF COMPANY		WORK PHONE	OCCUPATION
MEMBERSHIP IN COMMUNITY GROUPS, CIVIC ORGANIZATIONS, etc			
HOW DID YOU HEAR ABOUT THE CITIZENS POLICE ACADEMY?			
WHAT IS YOUR OBJECTIVE IN ENROLLING IN THE CITIZENS POLICE ACADEMY, AND WHY SHOULD YOU BE CONSIDERED?			
If you are accepted in the program, you will receive instructional and educational materials related to the law enforcement mission of the Pflugerville Police Department. As such, the materials presented will be privileged or confidential in nature. Due to the sensitivity of this information, it is necessary for the Pflugerville Police Department to conduct background checks, to determine the suitability of those persons desiring to attend the Academy classes.			
Please answer the following questions as accurately and completely as possible. Any intentional misrepresentation or omission of facts will be grounds for denial of admission to the Academy or, if already enrolled, immediate termination from the program.			
<i>A criminal history check will be made on ALL persons enrolling in the Pflugerville Police Department's Citizens Police Academy</i>			
DRIVER'S LICENSE: STATE AND NUMBER			
DO YOU GO BY ANY OTHER NAMES OR ALIASES NOW OR IN THE PAST? (Do not include maiden name)			
ARE YOU A MEMBER OF - OR HAVE YOU EVER BEEN - AFFILIATED WITH A LAW ENFORCEMENT AGENCY? If yes, explain: Yes: _____ No: _____			
HAVE YOU EVER LIVED OUTSIDE THE UNITED STATES (OR ITS TERRITORIES) IN EXCESS OF 90 DAYS? If yes, explain: Yes: _____ No: _____			
HAVE YOU EVER BEEN CONVICTED OF A FELONY, CRIME INVOLVING MORAL TURPITUDE, OR ARE CURRENTLY ON PROBATION / PAROLE FOR ANY OFFENSE? If yes, explain: Yes: _____ No: _____			
NAME AND PHONE NUMBER OF PERSON TO CONTACT IN CASE OF EMERGENCY:		RELATION:	
APPLICANT MUST COMPLETE THE FOLLOWING:			
I _____ hereby acknowledge that I have completed the above application completely and accurately, to the best of my knowledge. I also acknowledge that the Pflugerville Police Department will be conducting a background investigation on me to determine my suitability for admission to this program. Permission is hereby granted to conduct a background investigation based on the information given on the application.			
<i>Signature of Applicant</i>		<i>Date</i>	
MAIL YOUR APPLICATION TO:		PFLUGERVILLE POLICE DEPARTMENT CITIZENS POLICE ACADEMY P O BOX 679 PFLUGERVILLE TX 78691-0679	
BRING IN PERSON TO:		1611 E PFENNIG LANE, PFLUGERVILLE, TX 78660	
EMAIL APPLICATION TO:		OCL@pflugervilletx.gov	