







ADAMS COUNTY SHERIFF'S OFFICE CITIZENS ACADEMY

Application for Admission



CITIZENS ACADEMY APPLICATION

Admission

Please Print or Type:

- 1. The Citizens Academy application must be fully completed and signed before the acceptance evaluation can begin.
- 2. Applicants will undergo a criminal history and other background checks. Those found to have a criminal history will be individually evaluated as to the appropriateness of their attendance in the academy. Any individual found to have a felony conviction will be denied attendance. Any applicant that fails to disclose prior arrests for petty offenses, misdemeanors, or felonies will be eliminated from the application process.
- 3. After all the requirements are satisfied and an evaluation is completed, confirmation will be sent to all invited applicants.
- 4. A liability waiver release must be completed at the beginning of the first class of the Academy.

What expectations do you have of the Sheriff's Office and the Citizens Academy program?

Full Legal Name (Last, First Middle)	Preferr	red Name	Date of Birth		Social Security	#	
Full Address		E-Mail Address		Phone	Number	Sex	
Occupation & Employee	Full B	L usiness Address			Driver's License	<u> </u>	
Have you EVER been arrested or convicted of any petty crime, misdemeanor or felony? Yes No							
If yes, give details:							
When and Where:							
Briefly describe your reasons for wanting to attend the Adams County Sheriff's Office Citizens Academy.							



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How would you describe your experiences with law enforcement Briefly Explain:	nt? Positive Negative
Are you committed to attending the majority of the classes pro	vided?YesNo
How did you hear about the Academy?	
ist the person that should to be contacted in case of an emerg	ency during your attendance at the Citizens Academy:
Name	Relationship
Address	Telephone
f additional space is needed to answer any of the above questi	ons please attach additional pages.
	on is true and complete to the best of my knowledge. You are hereby emed necessary for consideration to attend the Adams County Sheriff's
Signature	
For Questi	ions Please E-Mail:
	nnections@adcogov.org
Su	ibmit by Email
Please Retu	urn Application To:
Community Connections Team 4430 S. Ad	ams County Parkway Suite W5400 Brighton, CO 80601
	OR

Applicants will be notified by e-mail or mail no later than two weeks, before start date. •

Download this form and save it onto your computer, fill it out and e-mail the competed form to: communityconnections@adcogov.org

