



ROCKY RIVER POLICE DEPARTMENT

21012 Hilliard Blvd. Rocky River, Ohio 44116

Citizen Police Academy 2017-01 APPLICATION

Thank you for applying to the *Citizen Police Academy Class 2017-01*. Return completed applications to the Police Department no later than ***Tuesday December 20, 2016*** in person, via US mail, or by email to glichman@rrcity.com. Classes begin Tuesday January 24, 2017. To be eligible for the Academy, applicants must:

- Be 21 years of age or older
- Have a High School Diploma or GED
- Be a resident of the City OR work in the City
- Have no pending criminal charges
- Have no felony convictions; misdemeanor convictions will be considered on a case by case basis
- No pending civil litigation against the City, any other municipality, state, or federal government or other governmental or quasi governmental agencies
- Have personal character consistent with community standards.

NAME _____
LAST FIRST MIDDLE

ADDRESS _____
Street Address

City State ZIP

EMAIL _____

MOBILE PHONE _____ HOME PHONE _____

DATE OF BIRTH _____ SOCIAL SECURITY NUMBER _____

PREVIOUS ADDRESS (if current address is less than 10 years). Please list dates of residency:

1. _____
Street Address City State ZIP

From _____ To _____

2. _____
Street Address City State ZIP

From _____ To _____

3. _____
Street Address City State ZIP

From _____ To _____

EMPLOYER _____	TITLE _____	Date Hired _____	
Street Address _____	City _____	State _____	ZIP _____
Supervisor _____	Phone Number _____		

EDUCATIONAL BACKGROUND:

High School/GED _____	Year of Graduation _____
College 1. _____	Years Attended _____
Degree Received/Course of Study _____	
College 2 _____	Years Attended _____
Degree Received/Course of Study _____	

REFERENCES Please provide 3 non-relative references.

1. _____	_____		
Name	Address		
Phone Number	Email Address	Relationship to Applicant	
2. _____	_____		
Name	Address		
Phone Number	Email Address	Relationship to Applicant	
3. _____	_____		
Name	Address		
Phone Number	Email Address	Relationship to Applicant	

HAVE YOU EVER BEEN ARRESTED AND/OR CONVICTED OF A CRIME, INCLUDING TRAFFIC VIOLATIONS? _____ If yes, please explain, including arresting agency, address, and date. Attach additional pages, if necessary:

ORGANIZATIONS YOU ARE A MEMBER OF (Civic clubs, community organizations, blockwatch, etc.)

WHY DO YOU WISH TO ATTEND THE CITIZEN POLICE ACADEMY?

.....

All applicants meeting the requirements for the Academy will be considered. Class size is limited. The City reserves the right to decline any applicant.

Successful completion of this Academy DOES NOT provide any professional certifications, licenses, or other qualifications.

Providing false information on this application will be grounds for non-admittance to or dismissal from the Academy.

A signed/witnessed copy of the City of Rocky River Authorization for Release of Information must accompany this application.

.....

I give my permission to the Rocky River Police Department to conduct a background check to determine if I have a criminal record and meet the requirements of entry into the City of Rocky River Citizen Police Academy.

Signature _____ Date _____

Witness _____ Date _____