

**MAPLE GROVE POLICE DEPARTMENT  
2016 CITIZENS' POLICE ACADEMY  
Application for Enrollment**

<b>PERSONAL</b>		
Name (Last/first/middle)	Date of Birth	
Street Address	Home Phone  Work Phone	
Email Address	Driver's License Number	
Are you a resident of Maple Grove? How long?		
<b>BACKGROUND</b>		
Please explain briefly why you wish to enroll in the Citizen Police Academy:		
Please list any associations, clubs, and organizations you belong to or are affiliated with:		
Have you ever been arrested for, convicted of, or cited for an offense other than minor traffic offense? YES ___ NO ___ If yes, please explain on back of sheet, list appropriate dates, places and charges:		
<b>REFERENCES AND EMPLOYMENT</b>		
Present Employer	Supervisor	Your title
Address	Telephone	Date hired
Personal Reference #1	Address	Telephone
Personal Reference #2	Address	Telephone
Emergency Contact	Relationship	Telephone
<b>RECOMMENDATIONS</b>		
How did you hear about the Maple Grove Police Citizens' Police Academy?		
<b>SIGNATURE</b>		
*I hereby certify that there are no willful misrepresentations, omission or falsifications in the aforementioned statements and answers. I understand that my omission or false statements on this application shall be sufficient cause for rejection for enrollment or dismissal from the Maple Grove Police Department Citizen Police Academy. I understand there is no charge for the Academy and, if selected for enrollment, pledge the time commitment to attend. I further understand that the Maple Grove Police Department will conduct a criminal history and records check on all applicants, the results of which could be grounds for my rejection.		
Applicant's Signature	Date	
Return completed applications to:		
Maple Grove Police Department Citizens' Police Academy 12800 Arbor Lakes Parkway PO Box 1180 Maple Grove, MN 55311	For more information call:	Detective Grant Smith 763-494-6221 Officer Matt Olson 763-494-6226
All applicants must be at least 16 years of age. Incomplete and/or unsigned applications will not be considered.		
<b>ACADEMY STAFF USE ONLY</b>		
Received by:	Received date:	
Records check by:	Date completed:	Recommendation: