Hennepin County Sheriff's Office
CITIZEN ACADEMY
Application for Enrollment

Full Name			DOB	Email
Street Address				Home Phone
City	State	Zip		Driver's License No.
County of Residence	How long?			State of Driver's License
Present Employer				Job Title
Street Address				Your Work Phone
City	State	Zip		Date Hired
Supervisor Name				Supervisor Phone
Personal Reference				Phone
Street Address				Relationship
City	State	Zip		Known for how long?
Emergency Contact				Phone
Street Address				Relationship
City	State	Zip		

Briefly explain why you wish to enroll in the Citizen Academy _____

_____

Were you recommended or advised to apply to the Academy? _____
If so, by whom? _____
Have you ever attended another citizen or police academy? _____
If so, where? _____
Please list any associations, clubs, or other affiliations: _____

_____

Have you ever been arrested for, convicted of, or cited for any offense other than a minor traffic offense? _____
If yes, please explain_____

_____

I hereby certify that there are no willful misrepresentations, omissions, or falsifications in the aforementioned statements and answers. I understand that any omission or false statement(s) on this application shall be sufficient cause for rejection of enrollment in or dismissal from the Hennepin County Sheriff's Citizen Academy. I understand that there is no charge for the Academy and, if selected for enrollment, pledge the time and commitment to attend. I further understand that the Hennepin County Sheriff's Office will conduct a criminal history and records check on each applicant, which could reveal grounds for rejection.

Applicant's Signature _____ Date _____

Incomplete and/or unsigned applications will not be considered.
All applicants must be at least 18 years of age.

Return completed applications to:
Sergeant Joel Svenby
Joel.Svenby@hennepin.us
Hennepin County Sheriff's Office
300 South 6th Street, A-2104
Minneapolis, MN 55415

ACADEMY STAFF USE ONLY
Date Received _____ Received By _____
Criminal History Check Completed _____
Records Check Completed _____
Approved or Declined _____
Completed By and Date _____