

**Portage Police Department**  
**Citizens Police Academy Application**

Contact information and Background Screening

The Portage Police Department is proud to host its' annual Citizens Police Academy. This 10 week course is free-of-charge to participants who have a connection to Portage and pass a background check. This course will be on Tuesday nights starting in January and ending in March. The start date will be given out to accepted applicants.

Thank-You for your interest in law enforcement and taking time out of your busy life to join us, the Portage Police Department, for an experience that I hope answers questions and offers insight. With that said, we ask that you attend at least 8 out of the 10 sessions.

Participant Information:

NAME: \_\_\_\_\_ (First, MI, Last)

DOB: \_\_\_/\_\_\_/\_\_\_                      Driver's License # \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE #: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

What do you hope to gain with your attendance in the Citizens Academy?

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Where did you hear about our Academy?

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Background Information:

Have you ever been arrested or convicted of a crime?

If yes please provide details:

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Have you been found guilty of a felony? YES or NO

Do you have any special accommodations that the Portage Police Department needs to know about? If yes, please list below.

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Authorization and Release

I understand that due to my participation in the Citizens Police Academy the Portage Police Department will conduct a criminal background check and driving history check to ensure the safety of all involved. By signing below, this authorizes the release of my information to Portage Police Department solely for the purpose of entry into the CPA Program and that all of the information on this application is true to the best of my knowledge.

Furthermore, I hereby release the Portage Police Department, its officers or representatives, and any entity providing information pursuant to this authorization and release of information, from all liability upon the provision of that information.

The Portage Police Department does have the right to deny participation based on the background check.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Please return this application to Portage Police Department Attn: Lt. Keith Klafke. Information on this form will be kept secure by Lt. Keith Klafke at the Portage Police Department.