

Prairie du Chien
Police Department
CITIZEN POLICE ACADEMY



Spring 2016

APPLICATION FORM

Last: _____ **First:** _____ **Middle:** _____.

Address: _____.

City: _____ **State:** _____ **Zip Code:** _____.

Date Of Birth: _____ **Phone:** _____ **E-mail:** _____.

Place of Employment: _____ **Job Title:** _____.

Cell Phone: _____ **Work Phone:** _____.

Grade Level Completed: _____ **If College (Where):** _____.

I AM A RESIDENT OF THE CITY OF PRAIRIE DU CHIEN: YES NO

I AM EMPLOYED IN THE CITY OF PRAIRIE DU CHIEN: YES NO

I HAVE A VALID DRIVER'S LICENSE: YES NO

HAVE BEEN YOU CONVICTED OF A CRIME: YES NO

HAVE YOU EVER BEEN EMPLOYED BY A LAW ENFORCEMENT AGENCY (POLICE, SHERIFF, STATE)? YES NO

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TIME REQUIREMENTS

The Prairie du Chien Citizen's Academy meets...

**One day per week: Thursday: 3/24, 3/31, 4/7, 4/14, 4/21, 4/28, 5/5,
5/12, 5/19, 5/26 2016**

Time: 6:00pm- 9:00pm

Are you able to meet this time commitment? YES NO

Why do you want to participate in the program, and what are your expectations?

What do you think a police officer's job entails?

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Do you think you are physically capable of completing the tasks in this program?

Applicants need to be at least 21 years of age to participate. Applications must be in by March 11, 2016. A soft background check will be done on each applicant. Interviews will be held on March 16, 2016, for applicants chosen for the next stage of the process.



Prairie du Chien Police Department

228 N. Beaumont Rd.

Prairie du Chien, WI 53821

Phone: (608) 326-2421 Fax: (608) 326-0702

AUTHORIZATION FOR RELEASE OF INFORMATION

(For official use only, not to be released to unauthorized person or persons)

I hereby empower an employee of the Prairie du Chien Police Department or other authorized representative thereof bearing this release to obtain information and records, within one year of the date of this release, pertaining to me from any or all the following sources:

1. Municipal, State, or Federal law enforcement agencies
2. Selective Service System
3. Present Employer
4. Any school, college, university or other educational institution
5. Any law enforcement or jail officer

Exceptions to this blanket authorization:

1. Any medical information in the possession of any source named above until subsequent to a conditional offer of employment (per Americans With Disabilities Act).
2. _____
3. _____

This release is executed to authorize the Prairie du Chien Police Department, as a prospective educator, to obtain the above information. It is understood that said information shall be used only in consideration of my participation and shall not be further disseminated for any purpose.

Date

Signature- Full Name

Address- Street and Number

City State Zip

Witness: _____
Signature