



**WHEATON POLICE DEPARTMENT
CITIZEN'S POLICE ACADEMY
WAIVER AND RELEASE**



Name: _____
Last First Middle

Date of Birth: _____ Driver's License Number: _____

Home Address: _____ City/State: _____

Length of time at current address: _____ Email Address: _____

Home Phone: _____ Cell Phone: _____

**IF YOU ARE NOT A WHEATON RESIDENT BUT YOU ARE EMPLOYED IN WHEATON,
PLEASE COMPLETE THE EMPLOYMENT SECTION BELOW:**

Employer: _____ Occupation: _____

Employer Address: _____

Employer Telephone: _____ Length of Employment: _____

Have you ever been convicted of a felony? YES NO

If yes, explain where, when and the disposition: _____

How did you hear about the Wheaton Citizen's Police Academy? _____

All applicants must be at least 21 years of age and must live or work in the City of Wheaton. A background check will be conducted on each applicant. The Wheaton Police Department reserves the right to deny entry to the Citizen's Police Academy based on findings from the background check.

All information on the above application is true and accurate. I authorize the Wheaton Police Department to conduct a criminal background check based on this application.

Signature: _____

Print name: _____ Date: _____