## A free service of the Sherman Police Department



## **Citizen Police Academy Application**



## A commitment to complete the 9-week academy will be required.

Please return completed application to Sgt. Brett Mullen at the Sherman Police Department, 317 S. Travis, Sherman, TX 75090 or fax to 903-892-7395.

PLEASE INCLUDE A COPY OF YOUR TEXAS DRIVER'S LICENSE OR IDENTIFICATION CARD.

Please contact Sgt. Brett Mullen at 903-328-3010 or brettm@cityofsherman.com for more information.

Applicants for the Citizen Police Academy must meet the following requirements for admission:

Applicants must sign waiver of liability.

Applicants must not have a criminal history.

Applicants must be	•	•	entire	e academy.	Applicants must live	, work, or	attenu scho	01 111 311	erman.	
Last Name			First Name			Date o	Date of Birth			
Home Phone Number			Work Phone Number			Cell Ph	Cell Phone Number			
Home Address							City			
State	te Zip Code		Driver's License/Identification Number			Email Address				
High School Graduate? Yes No		Name of School			College Graduate? Yes No	Name of College				
Have you ever been lf yes, provide the		•			n offense other than	traffic off	enses? Yes	N	0	
Employer Name				Employer Address						
City State		State			Zip Code	Employer Phone Number				
Personal Reference Name										
City		State		Zip Code	Personal Reference Phone Number					
Personal Reference Name										
City	State				Zip Code	Personal Reference Phone Number				
I hereby certify th that the Sherman	at there Police [	are no willful n Department wil	nisrepr Il be co	esentations, inducting a t	vill not empower part omissions, or falsifica horough background check, and reference	ations on the investigat	his applicatio	n. I unc		
Signature					Date					
				FOR OFFICE		I		.,		
Received By Date Receive			a		Checked By		CH Clear?	Yes	No	
If no, explain:										