

MAYVILLE POLICE DEPARTMENT

25 South School Street P.O. Box 208 Mayville, WI 53050 (920)387-7903 FAX: (920)387-7918

CITIZENS POLICE ACADEMY APPLICATION FORM

APPLICANT INFORMATION		
Name(Last, First, MI):		
Date of birth:	SSN:	Phone:
Current address:		
City:	State:	ZIP Code:
How long at this address? Years:	Months:	Email:
Previous address (if less than 5 years at present address):		
City:	State:	ZIP Code:
Driver's License Number:		State:
EMPLOYMENT INFORMATION		
Current employer:		
Employer address:		How long?
Phone:	E-mail(optional):	Fax:
City:	State:	ZIP Code:
EMERGENCY CONTACT INFORMATION		
Nam(Last, First, MI):		
Address:		Phone:
City:	State:	ZIP Code:
Relationship:		
MISC. INFORMATION		
The Mayville Police Department provides T-shirts to academy members, Please circle your preferred size. S M L XL XXL XXXL		
All applicants must either live in Mayville, work in Mayville, or own property in Mayville. They must be at least 18 years of age. A background check will also be conducted on each applicant prior to selection. The Mayville Police Department reserves the right to deny entry to the Academy based on findings of that background check.		
I certify that all the information provided in this application is true and accurate to the best of my knowledge. I understand and authorize the Mayville Police Department to verify any and all information contained on this application.		
Signature of applicant:		Date:

FOR OFFICE USE ONLY		
BCK:	FILE:	NOTATION: