

DANE COUNTY SHERIFF'S OFFICE CITIZENS ACADEMY

	Application	n for Enrollr	nent			
Name (Last, First, Middle)		Gender		e of Birth	Date of Application	
Mailing Address		Zip C	Zip Code		Home Telephone	
Home Address					County of Residence	
Place of Employment Occupation		Work Telephone			E-mail Address	
List all cities and states you have resi	ded in.	_ 				
How did you hear about the Sheriff's Citizen Academy?			List Memberships in community groups, civic organizations, etc.			
If you are accepted for enrollment int						
enforcement mission of the Dane Counature. Due to the sensitivity of this in						
determine the suitability of those pers	sons desiring to attend the ac	ademy classes. Î	Please answ	er the foll	owing questions accurately and	
completely as possible. Any intention already enrolled immediate termination						
Sheriff's Citizen Academy. The inform						
Driver's License or Identification Number State			Social Security Number			
Do you go by any other names or alia	ses now, or in the past? If yes	, list and explain				
Are you a member of, or have you eve	er been affiliated with a law er	nforcement agen	cv? If ves. e	xplain.		
		g	JJ ,			
Have you ever been convicted of a fe	lony or are you currently on p	robation/parole f	or any offen	se? If yes,	explain.	
		·	-			
Name, Address and Telephone Numb	er of an Emergency Contact			Rela	tionship	
·					·	
APPLICANTS MUST COMPLET	TE THE FOLLOWING:					
7.1. 7. 2.107.11.110 III.00 1 00 III.1 22						
Iunderstand the Dane County Sheriff's	hereby acknowledge I have					
to the academy. Permission is hereby	granted to conduct a backgr	ound investigation	on based on	the inform	nation provided in this application	
Throughout the class, photos will be to material.	taken and I give my permissio	n for those photo	s to be used	d on social	I media and on promotional	
Signature of Applicant			Date			