

Citizen Police Academy - 2017

Application



Personal Information

Please print legibly

Last Name: _____

First Name: _____

Middle Name: _____

Date of Birth: _____

Sex: Male Female

Email Address _____

Address: _____

City: _____

Province: _____

Postal Code: _____

Home Phone: () _____

Cell - _____

Occupation: _____

Work Phone: () _____

Education Completed: High School Community College University

Education Presently Enrolled: High School Community College University

Have you ever been charged with or convicted of a criminal offence? YES NO

Have you applied for this program in the past? YES NO Year _____

Briefly explain why you wish to participate in this program?

Completed forms accompanied by photo identification must be returned to your local service centre or to CKPS Headquarters no later than February 17, 2017.

Only successful candidates will be notified

For Office Use Only

Background Check

CPIC
CR2
IRIS

Checked by: _____
Checked by: _____
Checked by: _____

Date: _____
Date: _____
Date: _____

Date Approved: _____

Approved By: _____

Date Notified: _____

Notified By: _____

Comments:

Not Approved: _____

Date: _____

Comments:

Signature of Co-Ordinator

Date