



**ALLENTOWN POLICE ACADEMY
ACT #120 CIVILIAN APPLICATION**



Name: _____ Gender: _____

Address: _____

City/State/Zip: _____

Cell Phone #: _____

Date of Birth: _____ Social Security #: _____

Place of Birth: _____

Other Languages Spoken: _____ First Language, if other than English: _____

Email Address: _____ Marital Status: _____

Are You On Any Social Network? Is So, Please List: _____

Driver's License #: _____ State License Issued: _____ Height: _____ Weight: _____

Citizenship: Us ___ Dual ___ Please Specify Other Country of Citizenship: _____

Have You Ever Been **Arrested, Convicted, or Plead Guilty** For Any Summary, Misdemeanor, or Felony Offense?
Yes or No *If Yes, Explain On Reverse Side.*

Have You Ever Been **Cited Or Convicted** For Any Traffic Offenses? Yes or No
If Yes, Explain On Reverse Side. Please List Specific Dates And Locations.

Current Employer: _____

Supervisor Name & Phone Number: _____

May we contact your supervisor? _____

Will you continue to work while attending the Academy? _____

Medical Coverage (Company & Policy #): _____

Education:

High School: _____ Location (City, State) _____

Dates Attended: _____ Graduation Date: _____ GED – Year Obtained: _____

List all Colleges/Universities/Technical schools at which you have taken courses:

Name of College/University/Tech School	Location (City, State)	Dates Attended	Degree/Certification
_____	_____	_____	_____
_____	_____	_____	_____

Number of credits earned: _____

Military Service:

Branch _____ Dates Served _____ Rank _____

Are you a Member of a Reserve Unit? Yes or No

Alternate Contact Info – List two contacts:

Name: _____ Relationship: _____

Phone: _____ Email: _____

Name: _____ Relationship: _____

Phone: _____ Email: _____

In case of emergency whom should we contact? _____

References – Include One Employer Reference and Two Non-Family References:

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Have you ever applied to any other police academy? Yes ___ No ___ If yes, where? _____

Expected Physical Activities:

Running 2-5 miles 3-5 days per week; circuit training at least 2 days per week; bench press your body weight; 40 sit-ups in 1 minute; 5 pull ups and 50 push ups. Firearms training – eye/hand coordination to safely handle a firearm. Signature on attached release is certification you can perform expected activities.

QUESTIONNAIRE:

Use a separate sheet of paper to answer the following questions. Make sure you answer all 5 questions.

Why do you want to be a Law Enforcement Officer?

Identify three things that attract you to being a Law Enforcement Officer.

What have you contributed to your family, school, work and/or community?

How will this program help you?

Where do you expect to be career-wise in five years?

Agreement:

I promise, upon being accepted as a student in this training program to abide by the rules of the Police Academy And I agree to dismissal if found guilty of disobedience or improper conduct. All information submitted on this application is true and correct to the best of my knowledge.

SIGNATURE OF APPLICANT: _____ **DATE:** _____

PRINT NAME: _____

RETURN COMPLETE PACKET TO: Allentown Police Academy, 2110 Park Dr., Allentown, PA 18103-9604

APPLICATION PACKET MUST INCLUDE:

- Application form
- Release and Indemnification Agreement form
- Copy of current driver’s license
- Current criminal record check from each state lived in
- Copy of High School Diploma or GED certificate
- Proof of citizenship
- Application disclosure form
- Authorization and consent for release of personal information

For Office Use Only:

Date Received: _____