

Folsom Public Safety Citizen's Academy



FOLSOM POLICE DEPARTMENT | 46 NATOMA STREET, FOLSOM, CA 95630 | WWW.FOLSOM.CA.US/POLICE

The Citizen's Academy creates a greater understanding and trust between Public Safety and Folsom residents. The successful completion of Citizen's Academy is also required for those who wish to be considered for the CAPS Volunteer Program. The Citizen's Academy will begin on March 13, 2024. Classes are held every Wednesday for 8 consecutive weeks. Graduation will be held on May 1, 2024. Class size is limited.

Application Requirements

To be considered for the Citizen's Academy, applications must meet the following requirements:

- Be 21 years of age or older
- Have no felony arrests
- Have no outstanding warrants
- Have no misdemeanor convictions involving moral turpitude or violence

Initial background check will be conducted on all applicants, full law enforcement background will be conducted on all CAPS applicants.

DEADLINE TO APPLY: Thursday, January 25, 2024 (or until class is filled)

You will receive a letter confirming your acceptance into the 2024 Citizen's Academy

This application must be submitted in person to the Folsom Police Department

The Release and Waiver (on back page) must be witnessed by a Folsom Police Department Employee.

Please type or print clearly:

Name:

Last First MI

Address:

How Long?

Previous Address
(if less than 2 yrs)

Telephone:

Home:

Cell:

Email:

Driver's License

DOB:

Employer:

Occupation:

Employer's
Address/Phone:

Community Group
Affiliation(s):

How did you hear
about Citizen's
Academy:

Why do you wish to
attend the Citizen's
Academy?

Have you ever been
convicted of a
crime? Please
briefly explain:

AN HONOR TO SERVE, A DUTY TO PROTECT

RELEASE AND WAIVER

TO WHOM IT MAY CONCERN:

I am a Folsom Public Safety Citizen's Academy and/or Volunteer Applicant. I hereby authorize officer, agent, and/or assignee bearing this release to obtain any and all information, which you have concerning me.

I have specifically and permanently waived any rights I may have to review/inspect any and all information developed, so your response will be completely confidential.

CERTIFICATION:

I, the undersigned, certify that I have read this authorization form and that I understand its meaning and purpose.

Print Name (Last, First and MI)

Date of Birth

Address

Phone number

Applicant's signature (**Witnessed by Folsom Police Personnel**)

Witness' signature (**Folsom Police Employee**)