

# Oswego Police Department

## Citizen Police Academy

### Application Form

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Mid: \_\_\_\_\_

Address:  
Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date Of Birth: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Drivers License #: \_\_\_\_\_ Social Security #: \_\_\_\_\_

How long have you lived at present address: Yrs. \_\_\_\_\_ Mos. \_\_\_\_\_

Previous address *if less than five years at present address*: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Employers Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Length of employment: Yrs. \_\_\_\_\_ Mos. \_\_\_\_\_

Personal reference that we may contact:

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Telephone #: \_\_\_\_\_

**All applicants must either live in the village of Oswego, or maintain property or a business in the Village.** They must also be at least 18 years of age. A background check will be conducted on each applicant. The Oswego Police Department reserves the right to deny entry to the Academy based on the findings of that background check.

All information on the above application is true. I authorize the Oswego Police Department to conduct a background check based on this application.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FORM MUST BE RETURNED TO THE OSWEGO POLICE DEPARTMENT**