

# APPLICATION FORM

## CITIZENS' ACADEMY

Return to:

**MIAMI COUNTY SHERIFF'S OFFICE**  
209 South Pearl St  
Paola, KS 66071  
(913)294-3232

*We consider applicants without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a medical condition or handicap, or any other legally protected status.*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code

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

Business Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_

LIST ANY INVOLVEMENT IN NEIGHBORHOOD GROUP, CIVIC OR BUSINESS ORGANIZATIONS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Yes  No Are you 21 years of age or over?

Yes  No Have you ever been convicted of an offense against the law other than a minor traffic violation?

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Yes  No Are you available to attend the Citizens' Academy sessions for 9 weeks on Thursday nights from 6:00 pm to 9:00 pm?

