

**Odessa Police Department's
CITIZEN POLICE ACADEMY
APPLICATION:**

Date of Application: _____ T-Shirt Size: _____

Name: _____ Date of Birth: _____

Address: _____

City/State/Zip: _____

E-mail Address: _____

Phone Number: _____ Work Number: _____

Last 4 Soc/Sec#: XXX-XX-(_____) Driver's Lic#: _____

Employer: _____ Occupation: _____

Employer's Address: _____

(street) (city) (state) (zip)

Why do you wish to attend the Citizen Police Academy?

How did you hear about the Citizen Police Academy?

Have you ever been arrested or convicted of a crime? If so, please describe what for, when and where.

Give the name, address and phone number of two (2) character references:

1. _____

2. _____

Person to be contacted in case of emergency during your attendance at the Academy:

Name: _____

Address: _____

Relationship: _____ Phone Number: _____

Please complete the attached waiver and return the application in its entirety to:

*Odessa Police Department
Citizen Police Academy
Attn: Lydia Pittman
205 N. Grant Ave.
Odessa, Texas 79761*

Or email to: lpittman@odessa-tx.gov

CITIZEN POLICE ACADEMY
APPLICANT ADVISORY AND WAIVER

Due to the sensitive nature of some subjects being presented in the Odessa Police Department's Citizen Police Academy, a criminal history background check will be conducted on all individuals applying for attendance into the Citizen Police Academy.

Odessa Police Department facilities are in compliance with ADA rules.

The Odessa Police Department reserves the right to deny attendance to any person for any reason deemed to cause concern to the Citizen Police Academy Coordinator regarding the safety, legality, or advisability of the person's attendance. In addition, any person with a criminal conviction will be denied attendance to the Odessa Police Department's Citizen Police Academy.

I authorize the Odessa Police Department and its agents to conduct a background investigation. I authorize the release of all records requested, both public and private. I agree to hold harmless from criminal or civil prosecution any entity which releases records as a result of this request, the Odessa Police Department and their agents.

I hereby grant the Odessa Police Department permission to use my likeness in a photograph or video in any and all of its publications, including website entries, without payment or any other consideration.

I further agree that if I should be accepted into the Odessa Police Department's Citizen Police Academy, I will abide by the instructions of Odessa Police staff during all activities related to the Citizen Police Academy.

Printed Name: _____

Signature: _____

Date: _____