



## CARROLL COUNTY SHERIFF'S OFFICE

1000 NEWNAN RD • CARROLLTON • GA • 30116  
(PHONE) 770-830-5916 • (FAX) 770-830-5309

**SHERIFF TERRY E. LANGLEY**



### CITIZEN'S ACADEMY APPLICATION

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

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

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

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

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

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

Work Phone: \_\_\_\_\_ U.S. Citizen? \_\_\_\_\_

Have you ever attended Our Citizens Academy before? \_\_\_\_\_ If Yes, When? \_\_\_\_\_

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

How did you hear about the Citizen's Academy? \_\_\_\_\_

Have you ever been arrested / convicted of a crime? If so, explain \_\_\_\_\_

Organization(s) with which you are involved and any awards or recognition you have received: (i.e. Boy Scouts, Civic Clubs, Fraternal, etc.) \_\_\_\_\_

***\*\*Criminal History Records Checks will be conducted on all applicants\*\****

I hereby authorize the Carroll County Sheriff's Office, by signature or email conveyance of this document, to receive any Georgia Criminal History Records Information pertaining to me which may be in the files of any State or Local Criminal Justice Agency. This information is for internal review only.

Full Name \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security # \_\_\_\_\_ Sex \_\_\_\_\_ Race \_\_\_\_\_

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

(For the purpose of this background check the applicant authorizes an email to substitute in lieu of a signature until such time as an actual signature may be obtained)

**Notice to Applicants**

**Participants must be residents of Carroll County, business owners, or otherwise have a vested interest in the County. Participants will be chosen at the discretion of the Sheriff Office, and representing a cross section of the community. Participants must be at least 18 years old.**

Please complete the following online form and e-mail, it to or you may print and mail to:  
Bfinley@carrollsheriffga.gov

Carroll County Sheriff's Office  
Attn: Lt. Brian Finley  
1000 Newnan Rd  
Carrollton, GA 30116  
770-830-5916 ext. 2239

E-mail [bfinley@carrollsheriffGA.Gov](mailto:bfinley@carrollsheriffGA.Gov)

You may also deliver it in person during normal office business hours (8:30 -5:00pm).