45 WEST HIGH STREET, HODGENVILLE. KENTUCKY 42748 PHONE (270) 491-5357

Hodgenville Police Department Citizens Police Academy Application

Last Name:_____First:_____Middle: _____

Street Address: _____

City: _____State:_____Zip Code: _____

Phone Number:_____Date of Birth:_____

Occupation: _____

**Citizens Police Academy Requirements**

Applicants Must Be 18 Years of Age

Applicants with a Felony conviction will be considered on an individual basis for acceptance. You must not have any criminal or civil actions *pending* against you.

Applicants must be willing to sign a waiver releasing the City of Hodgenville and the Hodgenville Police Department from any liability or injury.

You should make every effort to attend all classes and give notice to the Hodgenville Police Department if you are unable to attend an evening. Attendance at four of the six classes is required for graduation.

I agree to the above requirements of the Hodgenville Police Department's Citizens Police Academy and authorize the Hodgenville Police Department to do a records check for any criminal history.

Signature of Applicant:_____Date: _____