

Manchester  
Citizens' Police Academy

MISSION STATEMENT

We are dedicated to providing our citizens with an opportunity to interact with their Police Department, in the hope of fostering a better understanding of the Department and it's role within the community of Manchester.

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We, the men and women of the Manchester Police Department are striving to eliminate barriers set forth by traditional policing methods. We elicit voluntary participation from our citizens to promote the concept of Community Oriented Policing. Through our combined efforts we will make our community a better place to live and work in.

[www.manchesterpolice.org](http://www.manchesterpolice.org)

Manchester  
Citizens' Police Academy  
**20<sup>th</sup> Session Application**

September 9, 2009 - December 16, 2009



Applications Must Be To Returned To The  
Manchester Police Department By:

**Midnight**  
**Friday, September 4, 2009**

Please complete (Print) this application in blue or black ink.

**Personal Information**

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

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

Middle Initial: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Driver's License # & State: \_\_\_\_\_

Social Security #: \_\_\_\_\_

**Residence Information**

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

City/State/Zip: \_\_\_\_\_

Home Telephone #: \_\_\_\_\_

**Work Information**

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

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

Employer's Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Employer's Telephone Number #: \_\_\_\_\_

Please circle your adult shirt size:

Small Medium Large Extra Large XX-Large XXX-Large

Briefly explain what you wish to gain by attending the Manchester Citizens' Police Academy:

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**Applicants must be at least 18 years of age and live or work in Manchester, Connecticut.**

A criminal history check will be conducted on each applicant. The Manchester Police Department reserves the right to deny entry into its Citizens' Police Academy.

Have You Ever Been Arrested? Yes  No

Have You Ever Been Convicted Of A Crime? Yes  No

I authorize personnel from the Manchester Police Department to perform a criminal history check on me.

\_\_\_\_\_  
(Print Your Name)

\_\_\_\_\_  
(Your Signature) Date: \_\_\_\_\_