



# Meriden Police Department Citizen Police Academy Application



All Applicants must be 18 years of age or older prior to the start of the Citizen Police Academy. Incomplete, non-legible or unsigned applications will not be considered. Applicants cannot have outstanding arrest warrants, felony convictions, domestic violence convictions, or weapon convictions. All applicants agree to a full criminal background check upon submission of this application.

This application is good for CPA Session: **2023-4 (April 27-June 15)**

**APPLICATIONS ARE DUE BY: April 10, 2023 at 3:00 pm**

## Biographical Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
Full Middle Name: \_\_\_\_\_ Maiden Name/ Alias: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City / Town: \_\_\_\_\_ State / Zip Code: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_ Other Phone: \_\_\_\_\_  
Driver's License State: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

## Professional Information

Current Occupation: \_\_\_\_\_ Title / Position: \_\_\_\_\_

## Emergency Contact Information (list who you want us to contact in case of an emergency)

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
City / Town: \_\_\_\_\_ State/Zip Code: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

## Criminal History / Background

Have you ever been arrested before for anything other than a motor vehicle violation? (Circle answer): YES/NO

If 'Yes', please explain arrest history:

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Additional Information:

Are you allergic to anything? \_\_\_\_\_

Do you require any special needs to be able to participate in this program? (The Meriden Police Department is committed to servicing all members of the community): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How did you hear about the Citizen Police Academy? \_\_\_\_\_

Are you interested in a career in Law Enforcement? \_\_\_\_\_

Why are you interested in attending the Citizen Police Academy? \_\_\_\_\_

Please list three (3) character references that are not family members or employers:

1. Name: \_\_\_\_\_ Home / Cell Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_ Home / Cell Phone: \_\_\_\_\_

3. Name: \_\_\_\_\_ Home / Cell Phone: \_\_\_\_\_

**Agreement**

I hereby certify that there are no willful falsifications, omissions, or misrepresentations in this application. I understand that any omission or false statement on this application shall be sufficient cause for rejection. I also grant the Meriden Police Department permission to verify all information listed in this application. I also understand that with submission of this application, I consent to a full criminal background check.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please ***SCAN & EMAIL*** or ***DROP OFF IN PERSON***, your completed application to:

Meriden Police Department  
Attention: Lieutenant Hector Cardona Jr  
50 West Main Street  
Meriden, CT 06451  
Phone: 203-630-6272  
Email: hcardonajr@meridenct.gov

**Please note:** Should the Meriden Police Department receive more applications than we can safely accommodate during this session, a lottery system will be utilized for selection and acceptance into this particular academy session. If you are not selected, you must reapply for any subsequent Citizen Police Academy sessions that may be scheduled in the future. Thank you for your understanding.

**Acceptance notifications will be made by Wednesday, April 19, 2023**

**STAFF USE ONLY:** Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Approved: \_\_\_\_\_ Rejected (reason): \_\_\_\_\_