



## Citizens Police Academy APPLICATION

Please complete all information and return in person to:

**Doña Ana County Sheriff's Department**  
**ATTN: Community Policing/Citizens Academy**  
845 N. Motel Blvd.  
Las Cruces, NM 88011

NAME: \_\_\_\_\_  
(Last) (First) (MI)

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
(City) (State) (Zip)

PHONE: \_\_\_\_\_  
(Home) (Work) (Cell)

EMAIL ADDRESS: \_\_\_\_\_

DATE OF BIRTH: \_\_\_/\_\_\_/\_\_\_ SS#: \_\_\_ - \_\_\_ - \_\_\_

DRIVER'S LICENSE #: \_\_\_\_\_ STATE: \_\_\_\_\_ EXP: \_\_\_\_\_

EMPLOYMENT: \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A FELONY? \_\_\_\_\_

HAVE YOU EVER BEEN ARRESTED FOR A MISDEMEANOR (INCLUDING DWI) WITHIN THE LAST THREE YEARS? \_\_\_\_\_

WHY ARE YOU INTERESTED IN PARTICIPATING IN THE CITIZENS ACADEMY?

\_\_\_\_\_  
\_\_\_\_\_

*I hereby certify that all information is accurate and correct. Any misleading or incorrect information will justify disqualification of my application.*

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_