



Grain Valley Citizens Police Academy

Grain Valley Police Department

711 Main

Grain Valley, MO 64029

(816)-847-6250

Application for Enrollment

Name: _____ Date: _____

Address: _____

City/Zip: _____ Date of Birth: _____

Email Address: _____ SS# _____

Drivers License #: _____ State: _____

Home Phone: _____ Work Phone: _____

Occupation: _____

Community Group Affiliation (if any): _____

Why do you wish to attend the Citizens Police Academy? _____

How did you hear about the Citizens Police Academy? _____

List two references:

1. _____ Phone Number: _____

2. _____ Phone Number: _____

I authorize the Grain Valley Police Department to conduct a background investigation to obtain any information relating to my criminal history record for the purpose of making a determination of eligibility for the Grain Valley Citizens Police Academy. Applicants cannot have any felony convictions or DWI or drug related convictions. I also understand I may attend this program once within a year.

Applicant's signature: _____ Date: _____

Please mail completed form to:

Grain Valley Police Department

Sergeant Curtis VanderLinden

Citizens Police Academy

711 Main

Grain Valley, MO 64029

Or fax application to: (816)-847-6259

Questions? Call (816)-847-6250 or Email: Cvanderlinden@grainvalleypolice.org