



**Public Safety Academy
Application**

All applicants must be at least 18 years of age and must live or work in Meridian. Incomplete or unsigned applications will not be considered. Please type or print all information. *Note: This document may be considered a public record and some information may be subject to current Idaho Public Records Law.*

Name:		
First	M.I.	Last
Any other names, including maiden:		
Address:		Home Phone:
Street		Cell phone:
City	Zip	Date of Birth:
Driver's License Number:		Position or Title:
Current Employer:		
Email Address:		
Associations, organizations or clubs you belong to:		
Why do you want to attend the Public Safety Academy?		
Have you been convicted of or have current criminal charges pending for any offense other than traffic infractions? If you have please give details (felony conviction may disqualify attendance in the academy):		

How did you hear about the Public Safety Academy? Are you associated with the City of Meridian?

Please review your answers carefully and read the statement below before signing this application.

I hereby certify that there are no willful misrepresentations, omissions or falsifications in the foregoing statements and answers to questions. I understand that any omission or false statement on this application shall be sufficient cause for rejection for enrollment or dismissal from the Meridian Public Safety Academy.

I further understand that the Meridian Police Department will be conducting a thorough background investigation that may include, but is not limited to, criminal history, employment history and personal references. I also understand that any student may be removed from the Meridian Public Safety Academy if said student is disruptive or otherwise inhibits the concept of this program.

I understand that I am expected to either attend or make up all classes held during the Meridian Public Safety Academy. I also understand that all applicants will be accepted and retained, or rejected, upon the sole discretion of the Chief of Police or his designee.

Signature:

Date:

Please turn in completed application to:

Stephany Galbreath | Crime Prevention Specialist
sgalbreath@meridiancity.org
Meridian Police Department
1401 E. Watertower Street, Meridian, Idaho 83642
Phone: 208-846-7360 | Fax: 208-846-7372

For Staff Use Only

Received by

Date: _____ *Time:*

Assigned Background Investigator _____ *Ada#* _____