

**Scranton Police Department
Chief Carl Graziano**

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**Be Part of
The Solution**

SCRANTON

Application for Citizen's Police Academy

Name: _____ **Date:** _____

Email Address _____

Street Address: _____

City/State//Zip: _____ **Date of Birth:** _____

Driver's License #: _____ **State:** _____

Social Security#: _____ **Sex:** _____ **Race:** _____

Shirt size (circle one): S M L XL XXL

Home Phone #: _____ **Work Phone #:** _____

Occupation/Employer _____

Community Group Affiliations (if any): _____

Why do you wish to attend the Citizen's Police Academy? _____

How did you hear about the Citizen's Police Academy? _____

List two references:

1. _____ **Phone Number:** _____

2. _____ **Phone Number:** _____

Have you ever been arrested for any offense other than a traffic violation?

If so, please state reasons for arrest: _____

- *I authorize the Scranton 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 Citizen's Police Academy.*
- *I certify that all information given is true and accurate to the best of my knowledge.*
- *This training is **not** designed to certify citizens to perform the duties of Law Enforcement.*

Signature: _____ **Date:** _____