

Class # _____

**CITIZEN POLICE ACADEMY
Clute Police Department**

APPLICATION

Name _____
Last First Middle

Address _____
Street City State Zip

Telephone Number _____

Date of Birth _____
Month Day Year

Nickname(s), maiden name, or other names by which you have been
known _____

Social security number _____

Drivers license number _____

Place of employment _____
Name of Business

_____ Address City State Zip Phone

Have you ever been arrested for a felony offense? _____ yes _____ no

Details: _____

In case of emergency, please notify:

_____ Name Phone