

**GREEN TOWNSHIP**  
**CITIZEN POLICE ACADEMY**  
**Background Investigation Authorization**

(Please Print or Type)

Name: \_\_\_\_\_  
                Last    First    Middle

Address: \_\_\_\_\_  
                Number/Apt. #    Street    Rd./Ave./Etc.

\_\_\_\_\_ City    State

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Social Security #: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
                    Mo                                  Day                                  Year

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

State Identification Number (if no drivers license): \_\_\_\_\_

I, the undersigned, hereby authorize the Green Township Police Department, to conduct an investigation into any traffic and criminal convictions that I may have on any record, including during any military service (please provide military information on bottom of permission form). I understand that this is being conducted as part of the application process for the Green Township Citizen Police Academy sponsored by the Green Township Police Department and that the results thereof will be used for the purpose of determining my eligibility to participate in the Citizen Police Academy.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For Green Township Police Department Only: (Do not write below this line.)

Date: \_\_\_\_\_

Traffic Convictions: \_\_\_\_\_ Misdemeanor Convictions: \_\_\_\_\_ Felony Convictions: \_\_\_\_\_

Other comments on background: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approved \_\_\_\_\_ Disapproved \_\_\_\_\_

\_\_\_\_\_  
Bart W. West - Chief of Police

# GREEN TOWNSHIP POLICE

## CITIZEN ACADEMY Participant Application

---

---

(Please Print or Type)

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Number/Apt. # Street  
\_\_\_\_\_  
City State Zip Code

Home Ph. #: ( ) \_\_\_\_\_ Work Ph. #: ( ) \_\_\_\_\_

Employer: \_\_\_\_\_

Employer Address: \_\_\_\_\_  
Number Street  
\_\_\_\_\_  
City State Zip Code

Supervisor's Name: \_\_\_\_\_

Year of Hire: \_\_\_\_\_

Occupation: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

Have you ever been arrested for an offense, other than minor traffic violations? \_\_\_\_\_

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What were the dates, city and state: \_\_\_\_\_  
\_\_\_\_\_

What civic organization(s) in Green Township, if any, are you a member? \_\_\_\_\_

Explain why you want to attend the Green Township Citizen Police Academy: *(Use reverse side of this sheet if more space is needed.)*  
\_\_\_\_\_  
\_\_\_\_\_