



**APPLICATION FOR BRENTWOOD POLICE DEPARTMENT
CITIZENS POLICE ACADEMY**

Note: We recommend you use a browser other than Google Chrome to complete this form.

NAME: _____ DATE OF BIRTH: _____

ADDRESS: _____

LIST ANY OTHER ADDRESSES YOU HAVE RESIDED AT IN THE CITY OF BRENTWOOD, TN

E-MAIL ADDRESS _____

LENGTH OF RESIDENCY IN THE CITY OF BRENTWOOD: _____

TELEPHONE (CELL): _____ WORK: _____

REASON FOR REQUESTING TO PARTICIPATE IN PROGRAM: _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY: **YES** **NO**

HAVE YOU EVER BEEN CONVICTED OF A FELONY INVOLVING MORAL TURPITUDE?
YES **NO**

I AM WILLING TO UNDERGO A BACKGROUND INVESTIGATION BY THE CITY OF
BRENTWOOD POLICE DEPARTMENT DUE TO THE SENSITIVITY AND NATURE OF SOME
OF THE INFORMATION THAT WILL BE COVERED DURING THE COURSE OF TRAINING.

YES **NO**

SIGNATURE OF

APPLICANT _____

DATE