



METROPOLITAN POLICE DEPARTMENT – CITY OF ST. LOUIS

Citizens Police Academy Application

SECTION I - Personally Identifiable Information

Name _____
Last First Middle

Home Address _____ City _____ State _____ Zip _____

Phone Number _____ Alternate Number _____ Email Address _____
(Optional) (Optional)

Date of Birth _____ Gender _____ Social Security Number _____
MM/DD/YY (Optional)

If you are a St. Louis City resident, how long have you resided at this address? _____

If you own a business in the City of St. Louis, please complete the below information about your business.
If you are not a St. Louis City business owner, please skip to SECTION II.

Business Name _____

Business Address _____ City ST. LOUIS State MO Zip _____

Business Phone Number _____ Length of Ownership _____

SECTION II - EMPLOYMENT INFORMATION

Current Employer's Name _____ Years Employed _____

Employer's Address _____ City _____ State _____ Zip _____

Employer's Phone Number _____

SECTION III - REFERENCES (Please list two character references who are not relatives.)

Name _____ Phone Number _____

Occupation _____ Years Acquainted _____

Relationship to Applicant _____

Name _____ Phone Number _____

Occupation _____ Years Acquainted _____

Relationship to Applicant _____

Section IV Personal Information

Please list any civic groups, neighborhood associations or groups, business or professional organizations to which you belong. (You will not be disqualified if you do not belong to any organizations.)

Please detail any previous law enforcement experience, if applicable.

Have you ever been convicted of a crime other than minor traffic offenses? If so, please provide the date of conviction and other pertinent details. Those with convictions besides minor traffic offenses will be considered for admission to the Citizens Police Academy on a “case by case” basis.

Why are you interested in attending the Metropolitan Police Department’s Citizens Academy?

I am submitting this application to attend the Citizens Police Academy and understand and agree that the Metropolitan Police Department may perform a record check.

Applicant’s Printed Name

Applicant’s Signature

Please mail completed application to:
Metropolitan Police Department, City of St. Louis
Att: Citizens Academy
1200 Clark Avenue
St. Louis, MO 63103

Questions? Contact Sgt. Catherine Dennis at 314-444-5638 or at citizensacademy@slmpd.org

MPD Form GEN-399 (07/09)