

Scottsboro Police Department  
Citizen Police Academy

REGISTRATION APPLICATION

If you would like to attend an upcoming session of the Citizens' Police Academy, please complete this application form and mail it to:

**C/O Scottsboro Police Department**  
**916 S. Broad St**  
**Scottsboro Al 35768**

Name: \_\_\_\_\_

\* Address: \_\_\_\_\_ \* email address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: Home \_\_\_\_\_

Cell or other # \_\_\_\_\_ (Please advise if you receive texts)

Date of Birth: \_\_\_\_\_

Social Security # or DL # : \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_ (check one please) Resident \_\_\_\_\_ Business Owner \_\_\_\_\_

NOTE: All applicants will be subject to a **background check** prior to acceptance into the academy. If you have any questions please feel free to call Officer Wade Patterson at 256-574-4468 or 256-218-2005 or email at [wpatterson@scottsboroschools.net](mailto:wpatterson@scottsboroschools.net) .

\*\* You will be notified by mail or email in reference to your acceptance to this session of the academy.

All applications must be returned no later than February 28, 2022.

Shirt Size: \_\_\_\_\_ *S* \_\_\_\_\_ *M* \_\_\_\_\_ *L* \_\_\_\_\_ *XL* \_\_\_\_\_ *XXL* \_\_\_\_\_ *XXXL*

Please give two (2) references & their contact information..