



City of Aventura
Aventura Police Department
 Citizens Police Academy Application

Name	Date of Birth
Address	Phone
Place of Employment	Employment Phone
Position	Supervisor Name and Phone

City of Aventura residents are given priority consideration to attend the academy.

I am a resident of Aventura: (Mark an X as applicable.)

- Yes
- No

During this training, you will be exposed to graphic materials, possible obscene language and be asked to participate in some realistic scenarios that involve minor physical activity such as standing and walking for short periods of time. Participation in these activities is not mandatory; however, if you do participate, we ask that you are physically capable of doing so.

This training is not intended to prepare participants to become police officers and should not be viewed as a method for obtaining employment with the City of Aventura or any other Police Department.

Please mark an X at this box to affirm that you, the applicant, have read and understand the above warning statements. []

Have you been arrested or convicted of any violation of any laws including traffic? (Mark an X as applicable.)

- Yes (If you answer yes to this question, attach a page listing all arrests with explanation.)
- No

How did you hear about the Aventura Police Citizens Academy? _____

Please list three personal references:

Name _____	Address _____	Phone _____
Name _____	Address _____	Phone _____
Name _____	Address _____	Phone _____

I understand that before I am authorized to attend the Citizens Police Academy with the Aventura Police Department, I must be at least 19 years of age, I must successfully complete a standard background investigation which will require the use of my social security number. By signing below, I hereby authorize this investigation and will provide additional information upon request. The above information is true and correct.

Signature _____ Date _____

FOR OFFICIAL USE ONLY

Driver License Number and State

Social Security Number
