



**Citizens' Academy
Los Angeles Field Division
~ ATF CA-3 ~**

When: January/February 2008 ~

Jan 30, 2008 (Wed)	6:30 pm - 9:00 pm
Feb 6, 2008 (Wed)	6:30 pm - 9:00 pm
Feb 15, 2008 (Friday)	10:00 am - 4:00 pm (Field Day)
Feb 20, 2008 (Wed)	6:30 pm - 9:00 pm
Feb 27, 2008 (Wed)	6:30 pm - 9:00 pm

Course Curriculum:

ATF history and agency overview
Certified Explosives Specialist program
Certified Fire Investigator program
Explosives Detection Canine
Explosives regulations
FFL inspections and firearms regulations
ATF Mobile Laboratory
"Shoot, Don't Shoot" Training Simulator
Firearms Range day
Special Response Team
Case study presentations
Southern California Regional Crime Gun Center

Eligibility:

- Must be a civic, religious or community leader
- Must be at least 21 years old (with no prior felony convictions)
- Must complete an Application and Authorization to Conduct a Law Enforcement Check
- Must live and/or work within the jurisdiction of the Los Angeles Field Division.

To apply for the Los Angeles Field Division's Citizens' Academy, please complete an Application and Authorization form.

Mail the **ORIGINAL** to the following address:

Bureau of ATF – Citizens' Academy

Attn: S/A Susan K. Raichel

550 N. Brand Blvd., Suite #800

Glendale, CA 91203

Questions: Please call (818) 265-2535 or via email at Susan.Raichel@atf.gov

CITIZENS' ACADEMY APPLICATION
(Page 1 of 3)

PERSONAL BACKGROUND

Name: _____
 First **Middle** **Last**

List all other names (nicknames, maiden name): _____

Date of Birth: _____ **Place of Birth:** _____

Gender: _____ **Male** _____ **Female**

Social Security Number: _____

Current Address: _____

Home Phone: _____ **Cellular Phone:** _____

Work Phone: _____ **Pager:** _____

Email Address: _____

EMERGENCY CONTACT:

Name/Relationship: _____

Phone Number: _____

Shirt Size (Men's Polo Style) _____

CITIZENS' ACADEMY APPLICATION (Page 2 of 3)

EMPLOYMENT INFORMATION

Current Employer: _____

Business Address: _____

Job Title: _____

Description of business/duties: _____

ORGANIZATIONAL MEMBERSHIP

List organizations, associations or community groups to which you belong:

How did you learn of the ATF Citizens' Academy? _____

Nominated By Whom?: _____

Authorization to Conduct Law Enforcement Check (Page 3 of 3)

Have you been arrested within the last 6 months?

Yes _____ No _____

Have you ever been convicted of a felony or serious misdemeanor?

Yes _____ No _____

If you answered YES to either question, please provide details including date, place, law enforcement agency, charges, court and disposition:

I hereby authorize ATF to conduct a standard check of law enforcement records pursuant to my application to the ATF Citizens' Academy. I understand this check will include, but not be limited to, any record of arrests, prosecutions or convictions for criminal or civil offenses, state or Federal. Any information obtained through this record check will be used exclusively for the purpose of determining my eligibility for a security clearance to participate in the Citizens' Academy.

My consent is valid for three months from the date of my authorization appearing below.

I also understand that concealing a material fact on this application can be the basis for rejection of my application to the ATF Citizens' Academy.

Printed Full Name

Signature

Date:

**Mail ORIGINAL application and authorization to:
ATF Citizens' Academy
Attention: Susan K. Raichel
550 North Brand Blvd., Suite #800
Glendale, CA 91203**