

PERSONAL BACKGROUND

Name:			
First	Middle	Last	
List all other names (nicknames, maiden n	ame):	
Date of Birth:	Place of Bi	rth:	
Gender:	Male	Female	
Social Security Numb	er:		
Current Address:			
Home Phone:	(Cellular Phone:	
Work Phone:	I	Pager:	
Email Address:			
EMERGENCY CON	ТАСТ:		
Name/Relationship: _			
Phone Number:			
Shirt Size (Men's Pole	o Styla)		



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 arrest	ted within the last	t 6 months?
Yes	No	
Have you ever been o	convicted of a felo	ony or serious misdemeanor?
Yes	No	
If you answered YES law enforcement age		n, please provide details including date, place, rt and disposition:
pursuant to my appli will include, but not for criminal or civil of this record check will eligibility for a secur	cation to the ATI be limited to, any offenses, state or I I be used exclusiv ity clearance to pa	standard check of law enforcement records F Citizens' Academy. I understand this check record of arrests, prosecutions or convictions Federal. Any information obtained through rely for the purpose of determining my articipate in the ATF Citizens' Academy. the date of my authorization appearing below.
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	_	aterial fact on this application can be the basis ATF Citizens' Academy.
Printed Full Name		Signature
Date:		

Glendale, CA 91203