



**GUILFORD COUNTY SHERIFF'S OFFICE  
CITIZEN ACADEMY APPLICATION**

**NOTE: Read questions in its entirety; any omissions or misrepresentation on this application will result in your application being DENIED.**

1. Name: \_\_\_\_\_  
Full Last Full First Full Middle

2. Date of Birth: \_\_\_\_ (Month) \_\_\_\_ (Day) \_\_\_\_ (Year)

3. Driver's License Number: \_\_\_\_\_ State \_\_\_\_\_

4. Sex: Male  Female

5. Ethnic Background:

African American  Native American

Asian American  White

Hispanic American  Other (Please Specify) \_\_\_\_\_

6. Height: Feet \_\_\_\_\_ Inches \_\_\_\_\_ Weight \_\_\_\_\_ lbs.

7. Nicknames or Aliases: \_\_\_\_\_

8. Social Security Number: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

9. Place of Birth: \_\_\_\_\_ (City) \_\_\_\_\_ (State)

10. Current / Permanent Address: \_\_\_\_\_

Telephone Number: Home: ( ) \_\_\_\_\_ Work: ( ) \_\_\_\_\_ Cell: ( ) \_\_\_\_\_

Email Address: \_\_\_\_\_

11. Previous Mailing Address: \_\_\_\_\_

How Long? \_\_\_\_\_ Years \_\_\_\_\_ Months \_\_\_\_\_

12. Citizenship: U.S. Citizen \_\_\_\_\_ U.S. Naturalized \_\_\_\_\_ Other \_\_\_\_\_

13. Law Enforcement Experience? Yes \_\_\_ No \_\_\_

**If the following questions are answered yes, attach a sheet explaining the circumstances. List the year and state in which they occurred, and the disposition of the case.**

**Put as much information as you can remember.**

14. **Have you ever (as an adult or a juvenile) been arrested, detained, or questioned by law enforcement concerning a crime? Yes \_\_\_ No \_\_\_**

15. **Have your driving privileges ever been suspended, revoked or cancelled? Yes \_\_\_ No \_\_\_**

16. **Have you ever received (a) traffic citation(s)? Yes \_\_\_ No \_\_\_**

17. **Have you ever been a defendant or plaintiff in a civil action? Yes \_\_\_ No \_\_\_**

18. **Are you now using any illegal drugs? Yes \_\_\_ No \_\_\_**

If yes, what drugs and how often? \_\_\_\_\_

19. **Have you ever possessed, used or sold any amount of illegal drugs? Yes \_\_\_ No \_\_\_**

If yes, what drugs and when? \_\_\_\_\_

20. **Do you drink alcohol (including beer and wine)? Yes \_\_\_ No \_\_\_**

If yes, how much and how often? \_\_\_\_\_

FOR OFFICE USE ONLY

Date Received: \_\_\_\_\_

NCIC / DCI / RMS / P2P / CJ Leads Check:

ACCEPTED / DENIED

DATE: \_\_\_\_\_

**WAIVER AND RELEASE  
GUILFORD COUNTY SHERIFF'S OFFICE  
CITIZEN'S ACADEMY**

I \_\_\_\_\_, for myself and on behalf of my heirs, executors, administrators or assigns, hereby covenant and agree as follows:

1. I hereby waive for all parties noted above all claims, demands, actions, or causes of action, against the Guilford County Sheriff's Office ("GCSO"), and each of their officers, agents, employees and representatives (all of the foregoing collectively referred to as "Releasees"), of whatever kind or nature, including but not limited to those arising out of personal injury, death, and property damage, which may arise from or relate in any way, directly or indirectly, to any of the following: (a) my participation in the Sheriff's Citizen Academy; (b) my participation in any activities related to or the GCSO; (c) my presence at any location where activities related to the Sheriff's Citizen Academy or the GCSO take place; (d) my presence at any location occupied or controlled by the GCSO; (e) travel to or from activities related to Sheriff's Citizen Academy or the GCSO; and/or (f) any act or omission by any Releasee of Sheriff's Citizen Academy with respect to the control or supervision of, its participants, or its supervisors. I further agree to never instigate any suit or action against any Releasee on any claim waived herein and to hold harmless Releasees from all such claims, including the costs of defense.

2. I acknowledge that photographs, films and recordings are sometimes made of the participants of Sheriff's Citizen Academy for pictures, news releases, and other documentary purposes. I hereby authorize the use of my image and voice to be used in any non-commercial manner by Releasees and by any radio, television, newspaper, or other media.

3. If this Waiver and Release were to be deemed unenforceable in any way, I acknowledge that it is the intent of the parties that it be enforced to the fullest extent legally permissible and that any provisions deemed unenforceable shall be severed and all remaining provisions enforced.

I have read the foregoing waiver and covenant and understand that it constitutes a formal legal document. By my signature I agree to abide by the conditions above.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Witness: \_\_\_\_\_ Date: \_\_\_\_\_

State of North Carolina,

County of \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

Commission Expires: \_\_\_\_\_