



Tennessee Bureau of Investigation
Citizens' Academy Application

Name _____ Date _____

Residence Address _____

City _____ State _____ Zip Code _____

Residence Phone # _____ Cell Phone # _____

Email Address _____

Date of Birth _____ Race _____ Gender _____

Place of Employment _____ Job Title _____

Business Address _____ Business Phone # _____

Driver License # _____ State _____ Expiration Date _____

SSN (for background check purposes only) _____

Have you ever been arrested for any offense other than a traffic violation?

No _____ Yes _____ (please include a brief description and status on the adjudication)

Please tell us why you want to attend the Citizens' Academy:

How did you hear about the Citizens' Academy? _____

There is a minimum 90% attendance required - please do not apply if you do not feel you can meet this requirement. I certify that all statements made on this application are true and complete. I hereby authorize the Tennessee Bureau of Investigation to make an examination of the above information for the purpose of evaluating my application and conducting an inquiry of my criminal history.

This training is NOT designed to certify citizens to perform law enforcement services.

Submit application to: _____

tbi.training@tbi.tn.gov

Signature