



**Greenville Police Department
Teen Police Academy
Summer 2018**

Name (legal name): _____
Last First Middle (Sr., Jr., III)

Date Of Birth: _____ SEX: M / F Race: _____

Address: _____

Home Phone Number: _____ Cell Phone Number: _____

School: _____ Grade: _____

Email Address: _____

Mother's Name: _____

Father's Name: _____

Guardian's Name: _____

Have you ever been accused/convicted of any offense other than a traffic offense? Y / N

If yes, what: _____

Have you ever been arrested/taken into custody? Y / N

If yes, what: _____

Have you ever been in trouble in school? Y / N

If yes, what: _____

What do you want to learn in the academy? _____

This information is needed because you will be priviledged to confidential information.
This form is confidential and kept in a secured office.