



# MYRTLE BEACH POLICE DEPARTMENT

## Citizens Police Academy Application Form

1101 Oak Street  
Myrtle Beach, SC 29577  
843-918-1800 (office)  
843-918-1833 (fax)



Print or type all answers. If more space is needed, use an additional sheet of paper.

Legal Name (Last/First/Middle): \_\_\_\_\_

Preferred Name on Class Documents: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, & Zip Code: \_\_\_\_\_

Phone #: \_\_\_\_\_ E-Mail \_\_\_\_\_

Date of Birth (mm/dd/yyyy): \_\_\_\_\_ SSN: \_\_\_\_\_

GENDER:  MALE  FEMALE Race: \_\_\_\_\_

I LIVE WITHIN THE CITY LIMITS OF MYRTLE BEACH.  YES  NO

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### EMPLOYMENT

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Employer: \_\_\_\_\_

Job Title: \_\_\_\_\_

Business Address: \_\_\_\_\_

I WORK WITHIN THE CITY LIMITS OF MYRTLE BEACH.  YES  NO

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### EDUCATION

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HIGH SCHOOL: \_\_\_\_\_ City: \_\_\_\_\_

College: \_\_\_\_\_ City: \_\_\_\_\_

College Degree:  Yes  No If yes, please provide your major. \_\_\_\_\_

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## CRIMINAL HISTORY AND DRIVING RECORD

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**South Carolina Driver's License Number:** \_\_\_\_\_

**Has your license ever been suspended or revoked?**

**Yes**  **No** If yes, please provide details, such as date, reason and length of suspension.

\_\_\_\_\_

**Have you ever been convicted of a crime? (Excluding traffic)**

**Yes**  **No** If yes, please provide information, such as date of arrest, charge, and disposition of case.

\_\_\_\_\_

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## QUESTIONNAIRE

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**1. WHAT EXPERIENCE HAVE YOU HAD WITH LAW ENFORCEMENT? (BRIEFLY EXPLAIN)**

\_\_\_\_\_

**2. WHAT IS THE EXTENT OF YOUR COMMUNITY INVOLVEMENT?**

\_\_\_\_\_

**3. WHY DO YOU DESIRE TO PARTICIPATE IN THIS PROGRAM?**

\_\_\_\_\_

**4. HOW DO YOU THINK THE COMMUNITY, AND THE POLICE DEPARTMENT MAY BENEFIT FROM YOUR PARTICIPATION IN THE PROGRAM?**

\_\_\_\_\_

**5. WHAT DO YOU EXPECT TO LEARN FROM THIS EXPERIENCE?**

\_\_\_\_\_

**6. HAVE YOU EVER APPLIED FOR THE ACADEMY BEFORE? IF SO, WHEN?**

\_\_\_\_\_

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## Commitment to Attendance

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The Citizens Police Academy is a ten week program, which meets on Monday evening from 7:00pm-9:00pm. Attendance is the most important factor in reaching the desired goal of the program. Two absences are permitted; however, full attendance is encouraged.

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## Signature of Acknowledgement

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The City of Myrtle Beach is an **Equal Opportunity Employer** and applies those same principles to selection of participants in the Citizen's Police Academy. Selection is done without regard to race, religion, color, national origin, sex, age, political affiliation or disability.

ADA Notice: The City of Myrtle Beach will not discriminate against qualified individuals on the basis of disability in its services, programs or activities. The city will make all reasonable

modifications to policies and programs to ensure that people with disabilities have an equal opportunity to enjoy its programs, services, and activities. Call 843-918-1114 for more information

I certify that all statements made on this application are true and complete. I understand that I may be rejected for submitting incomplete or false information. I hereby authorize employees of the Myrtle Beach Police Department to make an examination of the above information for the purpose of evaluating my application.

**TYPE IN NAME AS YOUR ELECTRONIC SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_**

**IMPORTANT:** This training is not designed to certify citizens to perform law enforcement services. Its purpose is to enhance community relations and to provide citizens with insight into the criminal justice system. Class size is limited. Residents and citizens who live and/or work within the city limits of Myrtle Beach are given first priority