



CITY OF DULUTH
POLICE DEPARTMENT

2030 N. Arlington Ave, Duluth, Minnesota 55811
Phone: (218) 730-5040 Fax: (218) 730-5911

Citizen Police Academy Application

This form must be completely filled out or it will be rejected

Full Name (middle & maiden name also) _____

Date of Birth _____ Address _____

City/State/Zip _____ E-mail _____

Phone _____ Driver's License # _____

HS Diploma or GED? _____ Name/Location of High School _____

Name/Location of College(s) Attended _____

Degree/Major _____

How did you find out about the Citizen Police Academy? _____

What do you expect to gain from attending this program? _____

Have you ever been charged with or convicted of an offense other than a minor traffic offense? _____

If yes, what were you charged with, where and when? _____

Present Employer _____ Supervisor _____

Your title _____ Employment Dates _____

Personal Reference _____ Relationship _____

Address _____ Phone _____

Emergency Contact _____ Relationship _____

Address _____ Phone # _____

Names of any Duluth Police Officers you are acquainted with _____

Signature _____ Date _____

This information will be used to run a criminal background on you. Application is good for one year.

[Return to Citizens Police Academy, Duluth Police Department, 2030 N. Arlington Avenue, Duluth, MN 55811](#) or
email it to Jodi Keller at jkeller@duluthmn.gov/police