



# Onslow County Sheriff's Office

## Citizens' Law Enforcement Academy Application for Enrollment

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### **Instructions:**

Please fill out the application packet in its entirety.

### **Background Check:**

1. A local criminal records check shall be conducted including the last five years.
2. Candidates with a North Carolina Concealed Handgun Permit do not require a criminal records check. You must enclose a copy of your CHP.
3. Candidates with unfavorable reports within the community, the organization they represent, or those with recent criminal misconduct will not be allowed to participate.

Please print or type all information. Only original signatures are allowed.

Complete all questions in detail and provide explanations as necessary.

If more space is needed, please submit additional pages, and reference the question number for each explanation.

### **IMPORTANT:**

Truthful and complete responses to this application are required.

Candidates must submit a copy of their driver's license or state-issued identification card.

This information will be subject to confirmation by administrative investigation.

Excluding the statement above, all information recorded in this application will be used only to determine the suitability and qualifications of the applicant for enrollment only. Copies of this information will remain on file with the Sheriff's Office for one (1) year.

Applications shall be mailed or personally delivered to:

Onslow County Sheriff's Office  
Attn: Capt. Dixon  
Citizen LE Academy  
717 Court Street  
Jacksonville, NC 28540

# Citizens' Law Enforcement Academy

## Application for Enrollment cont.

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### APPLICATION

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
(Last) (First) (MI)

Preferred Name: \_\_\_\_\_

Sex: Male Female

Address: \_\_\_\_\_  
(Number/Street) (City) (State) (Zip)

Home Phone: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Driver's License Number \_\_\_\_\_ State: \_\_\_\_\_ Issued Date: \_\_\_\_\_

Employer: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_  
(Name) (Phone) (City/State)

1. How long have you lived in Onslow County? \_\_\_\_\_
2. Have you previously attended any other class or program sponsored by a Law Enforcement Agency (i.e. City Police Academy, Ride-Along Program, etc.)? Yes No  
If yes, please explain: \_\_\_\_\_
3. Do you know anyone who is a member of the Onslow County Sheriff's Office or who has attended the Sheriff's Office's Citizens Law Enforcement Academy in the past? Yes No  
If yes, please provided the name and phone number: \_\_\_\_\_
4. Have you ever been cited or arrested for any offense Yes No  
other than a minor traffic violation?  
If yes, please explain:  
Offense: \_\_\_\_\_  
Date: \_\_\_\_\_ Location: \_\_\_\_\_  
Offense: \_\_\_\_\_  
Date: \_\_\_\_\_ Location: \_\_\_\_\_  
Offense: \_\_\_\_\_  
Date: \_\_\_\_\_ Location: \_\_\_\_\_  
Offense: \_\_\_\_\_  
Date: \_\_\_\_\_ Location: \_\_\_\_\_

# **Citizens' Law Enforcement Academy**

## **Application for Enrollment cont.**

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5. Please explain why you would like to attend the Citizens' Law Enforcement Academy and what you expect to gain? (50 words or less).

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Your submission of this application implies that you will be able to attend each class for the ten (10) weeks. Class size is limited to twenty (20) attendees, therefore, your attendance is required for graduation.

I, \_\_\_\_\_, hereby certify that the information provided in this application is true and complete to the best of my knowledge. The Onslow County Sheriff's Office is hereby authorized to make any investigation of my personal history it deems necessary for consideration to attend the Citizens' Law Enforcement Academy. I understand that false or misleading information given in this application may result in disqualification from the Academy.

Candidate's Signature: \_\_\_\_\_

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

# Citizens' Law Enforcement Academy

## Application for Enrollment cont.

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**\*\*\*THIS PAGE MUST BE NOTARIZED\*\*\***

### **LIABILITY WAIVER**

State of North Carolina

County of Onslow

WHEREAS, certain Citizens and persons having business interests in the County of Onslow desire to participate in the Citizens Law Enforcement Academy; and

WHEREAS, the Onslow County Sheriff's Office desires to facilitate their participation;

NOW, THEREFORE, for good and valuable consideration, the undersigned covenants and agrees for myself, heirs and assigns, that I will not at any time make any claim or demand, nor sue or commence, nor prosecute, nor cause or allow to be prosecuted in my name, any action at law or in equity against the County or its agents and employees because of injuries, damages, or other losses sustained or resulting to me directly or indirectly because of my participation in any activities as a part of the Citizens Law Enforcement Academy.

I fully understand that this covenant not to sue may be pleaded as a complete defense to any action that may be brought by me, my heirs or assigns.

I am executing this covenant freely and voluntarily.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Candidate Name: \_\_\_\_\_

Candidate Signature: \_\_\_\_\_

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

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

(SEAL)

# **Citizens' Law Enforcement Academy**

## **Application for Enrollment cont.**

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### **PHOTOGRAPH AND VIDEO RELEASE**

I, \_\_\_\_\_, grant the Onslow County Sheriff's Office, its representatives and members the right to take photographs or videos of me and my property in connection with my involvement with the Citizens' Law Enforcement Academy.

I authorize the Onslow County Sheriff's office, its assigns and transferees to copyright, use and publish the same in print or electronically.

I agree that the Onslow County Sheriff's Office may use such photographs or videos of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Internet or social media content.

I have read and understand the above:

Candidate Name: \_\_\_\_\_

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

Candidate Signature: \_\_\_\_\_

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

\_\_\_\_\_