



Winnebago County Sheriff's Office Law Enforcement Citizen's Academy

Application for Enrollment

Application Deadline: **FRIDAY AUG. 16, 2024**



If you are accepted for enrollment in the Winnebago County Sheriff's Office Law Enforcement Citizen's Academy, you will be subject to a criminal history background check. Please answer all questions as accurately as possible, as providing false information or misrepresentation of personal information will be grounds for denial of admission into the Citizen's Academy, or if already enrolled, immediate dismissal from the Citizen's Academy. Because applicants will be handling firearms, any person convicted of a felony or domestic violence will be precluded from the Citizen's Academy. All information provided here will be kept confidential.

The Winnebago County Sheriff's Office reserves the right to cancel the Citizen's Academy at any time due to low enrollment. Acceptance in the Law Enforcement Citizen's Academy will be on first come, first served basis.

Name (Last, First, MI): _____ Gender: _____ DOB: _____

Driver's License or State Issued ID Number: _____ State _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Place of Employment: _____ Occupation: _____

Email Address: _____

Please circle shirt size: S M L XL 2XL 3XL

List Memberships in community groups, organizations, etc.: _____

How did you hear about the Law Enforcement Citizen's Academy? _____

Briefly explain what you hope to achieve by participating in the Citizen's Academy? _____



Winnebago County Sheriff's Office
Law Enforcement Citizen's Academy
Application for Enrollment

Are you affiliated with any Law Enforcement Agency? If yes, explain. _____

Have you ever been convicted of a felony or are you currently on Probation/Parole? If yes, explain. _____

Name of Emergency Contact: _____ Relationship: _____

Address: _____

Phone Number: _____ Cell Phone: _____

I hereby certify that all the information contained in this application complete and accurate. I understand that the Winnebago County Sheriff's Office will be conducting a background investigation on me to determine suitability for admission to the Citizen's Academy.

Signature of Applicant: _____ Date: _____

Mail, Email or Drop off your completed application by **Friday August 16, 2024:**

Winnebago County Sheriff's Office
4311 Jackson Street
Oshkosh, WI 54901
ATTN: LT. Tim Eichman – Citizen's Academy

teichman@winnebagocountywi.gov