



Sonoma County Sheriff's Office

YOUTH ACADEMY APPLICATION

Applicant's Name: _____
Last First MI Nickname

Address: _____
Street City Zip

Date of Birth (MM/DD/YYYY): _____ Sex (M/F): _____ Drivers License #: _____
(If applicable)

Phone #: _____
Home Cell Work

Email: _____ T-shirt size: _____

School: _____ Grade in 2024/2025 school year: _____ Average GPA: _____

Parent/Guardian Primary language? English _____ Spanish _____ Other _____

Parent/Legal Guardian #1: _____ Home Phone #: _____

Address: _____ Cell or Work Phone #: _____

Parent/Legal Guardian #2: _____ Home Phone #: _____

Address: _____ Cell or Work Phone #: _____

Emergency Contact: _____
Name Phone # Relationship

AUTHORIZATION TO CONDUCT A BACKGROUND INVESTIGATION

As an applicant for the Sonoma County Sheriff's Office Youth Academy, I hereby authorize the Sonoma County Sheriffs Office to conduct a criminal history background investigation, including convictions, pending charges, and outstanding warrants. I understand that this criminal history check is being conducted due to the nature of the classes given at the Youth Citizens' Academy. I understand that all available police and criminal records will be checked and that the information will be used solely for determining eligibility of applicants for the Youth Citizens' Academy. All information is to remain confidential as required by state and federal statutes.

Signature of Applicant: _____ Date: _____

Signature of Parent or Guardian: _____ Date: _____

EMPLOYMENT HISTORY

Company Name: _____ Phone #: _____

Address: _____ Supervisor: _____

Dates of Employment From: _____ To: _____ Reason for Leaving: _____

Job title, description and responsibilities: _____

Company Name: _____ Phone #: _____

Address: _____ Supervisor: _____

Dates of Employment - From: _____ To: _____ Reason for Leaving: _____

Job title, description and responsibilities: _____

Have you ever been fired from a job or asked to resign? If yes, please explain: _____

Have you ever been convicted of any law violation, other than a traffic violation? If yes, please explain:

Media Release

(TO BE COMPLETED BY PARENT OR GUARDIAN)

I, _____, understand all aspects of the *Youth Citizen's Academy* program may be recorded, by audio and visual means, and may be used to promote future programs. Furthermore, I understand the media may be invited to view the event and may attempt to interview program participants. I am willing to provide my name and telephone number to be contacted by the media regarding *Youth Citizen's Academy* program. I hereby release and discharge persons representing the *Youth Citizen's Academy* program from any liability arising out of or in connection with the making, processing, reproduction or exhibition of video tapes or photographs promoting the *Youth Citizen's Academy* program.

Parent/Guardian of: _____ Date: _____

Print Name: _____ Signature: _____

QUESTIONNAIRE

Please state why you are interested in attending the Sonoma County Sheriff's Office Youth Citizen's Academy:

Describe any community/recreational activities in which you have participated (sports, clubs, non-profits, etc.):

REFERENCES

Please list two references, not relatives, who have knowledge of you professionally and/or personally.
References must be 18 years of age or older

Name: _____ Phone #: _____

Relationship (teacher, neighbor, coworker, etc.): _____ How long known: _____

Name: _____ Phone #: _____

Relationship (teacher, neighbor, coworker, etc.): _____ How long known: _____

RULES AND REGULATIONS

- Students, whether during academy classes or during off-program times, will not engage in any inappropriate conduct. This includes both criminal activity or any behavior that threatens or impedes on the participants and staff's ability to participate in a safe/non-hostile environment.
- Students are expected to attend all classes. Excused absences will be handled on a case by case basis. Unexcused absences will result in dismissal from the program. Please notify the program coordinator of any absences by no later than 8:00 a.m. that day.
- Tardiness will not be tolerated. Any student who is more than 20 minutes late will be considered absent. A student who is less than 20 minutes late on 2 occasions will be dismissed from the program.
- Students shall maintain a clean, groomed appearance at all times. Baggy clothing and display of offensive material will not be tolerated. Students will be given a class shirt, which must be worn to each class.
- Students will come to class prepared for scheduled lessons and will bring all necessary materials.
- Expect to participate. Each student is expected to participate in discussions and activities.
- Failure to comply with any of these regulations may result in dismissal from the academy.

AFFIDAVIT

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this application is true and complete. I understand that any false information or omission may disqualify me from further consideration for acceptance into the Sonoma County Sheriff's Office Youth Citizen's Academy and may result in my dismissal if discovered at a later date.

I understand that this application for acceptance to the Sonoma County Sheriff's Office Youth Citizen's Academy does not create an express or implied acceptance into the Academy nor guarantee acceptance for any definite period of time. If accepted, I understand that I have been accepted in the Youth Citizen's Academy at the will of the Sonoma County Sheriff's Office and my status may be terminated at any time.

I have read, understand, and by my signature consent to these statements.

Signature of Applicant:

Date:

Signature of Parent or Guardian:

Date:

Please return to: **Sonoma County Sheriff's Office**
 2796 Ventura Ave.
 Santa Rosa, CA 95403
 ATTN: Community Outreach Unit
 Office: (707) 565-2650
 E-mail: sheriff-outreach@sonoma-county.org

APPLICANTS WILL BE NOTIFIED OF THE STATUS OF THEIR APPLICATION 4 WEEKS PRIOR TO THE START OF THE PROGRAM.