REQUIREMENTS FOR PARTICIPATION IN THE KNOXVILLE POLICE DEPARTMENT’S CITIZENS’ POLICE ACADEMY

- Must be at least eighteen (18) years of age
- Must live or work within the City of Knoxville
- Complete a Personal History form
- Undergo a background investigation to include a criminal history check

A Selection and Nomination Committee will be responsible for reviewing all applications and upon consultation with the Chief of Police, will make the final selections for participation in each CPA.

In addition, this committee will be tasked with ensuring that each CPA contains a representative sample of our entire community:

- The CPA will meet for twelve (12) consecutive Thursday evenings from 6:30 pm to 9:30 pm at the Phil Keith Training Facility.
- Attendance of each session is critical to fully benefit from participation in the CPA. Please make every effort to attend each training session. If you will be unable to attend or will need to arrive late, please notify the CPA Coordinator at the earliest opportunity.
- Name of Coordinator: Officer Michele Goldsberry (865) 215-1308
- Dress is casual
- For those of you who enjoy smoking, we will provide you a designated area to smoke.
- The CPA may have optional activities that may require a certain degree of physical activity
GOAL

The goal of the Knoxville Police Department’s Citizens’ Police Academy is to create and develop a growing nucleus of responsible, well-informed citizens who have the potential to influence public opinion concerning police practices and service delivery. Graduates of our program will fulfill the critical role of providing input and information to their neighborhoods, which will increase citizen involvement on issues of mutual concern. This active citizens’ participation will improve the quality of life and build lasting and productive partnerships between our police department and the communities we so proudly serve.

OBJECTIVES

Upon successful completion of the Citizens’ Police Academy each graduate will:

1. Gain a better understanding of how the Knoxville Police Department is organized and how each unit functions, as well as achieve an appreciation for the daily challenges facing law enforcement professionals.

2. Possess the ability to participate and provide informed assistance in the organization of neighborhood watch groups as well as be a source of knowledge of additional crime prevention initiatives such as Prevention through Environmental Design and residential and business security.

3. Possess the skill and desire to identify, recruit, and mentor potential candidates for employment within the Knoxville Police Department as well as future participants in the Citizens’ Police Academy.

4. Demonstrate the enhancement of their observational skills and make a commitment to report any suspected criminal behavior.

5. Possess the knowledge and information to serve as a participant in the decision making process for a variety of community policing initiatives to include:

   a. Court monitoring
   b. Alcohol and other drug awareness programs
   c. Traffic safety campaign’s
   d. Violence prevention
   e. Mentoring programs for youth
   f. Victim awareness
   g. Victim support
The intentional omission or falsification of any material fact is cause for disqualification from participation.

**NAME AND ADDRESS**

1. List current complete name, address, and email address:

   ____________________________________________________________

   ____________________________________________________________

   ____________________________________________________________

   E-Mail Address: _____________________________________________

   Home Phone: ___________ Cell Phone: ___________ Work Phone: ___________

   Is your number unlisted / private?  Yes: _______  No: ___________

   Date of Birth: ___________  Place of Birth: __________________________

   List other addresses for the past ten years:

   ____________________________________________________________

   ____________________________________________________________

   How long have you been a resident of Knoxville: _______________________

2. Have you ever gone by a different name:

   Yes: _______  No: _______

   (i.e. nickname, maiden name, name change)

   If you answered yes, give name and explain:

   ____________________________________________________________

   ____________________________________________________________

   ____________________________________________________________

   ____________________________________________________________

   ____________________________________________________________
PERSONAL HISTORY

EDUCATION

3. High School graduate:
   Yes: ____  No: ______  Year: ____  GED: ____  Year: ____
   Name of high school and location:

4. College graduate?
   Yes: ____  No: ______  Year: ____  Degree: __________________________
   Name of college: __________________________
   If yes, appropriate number of credits: __________________________

5. Other technical training related to law enforcement: __________________________

   Other technical training: __________________________

   Hobbies and interests: __________________________

   Community activities: __________________________

Do you have any training, education, or experience that you could contribute to the department? If so, what:

______________________________

______________________________
RELATIVES


   Spouse’s Name: ________________________________________________________

   Spouse’s Occupation: __________________________________________________

   Former Spouse’s Name: ________________________________________________

7. Do you have any children? (List name, sex and age)

   _________________________________________________________________

   _________________________________________________________________

   _________________________________________________________________

8. Brother(s) and sister(s)? (List name(s) and address(es)):

   _________________________________________________________________

   _________________________________________________________________

   _________________________________________________________________

EMPLOYMENT

9. List your present employer, correct mailing address and phone number (include name of immediate supervisor and the exact date of employment).

   _________________________________________________________________

   _________________________________________________________________

   _________________________________________________________________

10. List all previous employers in the last ten (10) years (include exact dates of employment, correct mailing address, zip code, phone number, and name of immediate supervisor).

    _________________________________________________________________

    _________________________________________________________________

    _________________________________________________________________

    _________________________________________________________________
**DRIVING RECORD**

11. Do you have a current valid driver’s license? Yes: _____ No: _____

   License Number: ______________ Class of License: ______ St: ______

12. Has your license ever been suspended, revoked or canceled in this state or any other state:

   Yes: _______ No: _____ If yes, explain: ________________________________

   __________________________________________

   __________________________________________

**ARREST / CRIMINAL BACKGROUND**

13. Have you ever committed or participated in, or conspired to commit any of the following serious crimes:

   Murder: ________ Larceny: ________
   Rape: _________ Robbery: ________
   Manslaughter: _____ Arson: ________
   Sex Crimes: ______ Burglary: ________
   Other (explain): _______________________________________________________

   If you answer to any of the above is yes, please explain: ______________________

   __________________________________________

14. Have you ever been arrested as an adult: Yes: _____ No: _____

   If yes, explain when and where charged: ____________________________________

   __________________________________________

   Have you had any other encounters with law enforcement officers (good or bad)?

   __________________________________________
15. Have you ever been served a summons to appear in court?
   Yes: _________  No: _______
   If yes explain when and where charged: ______________________________________

16. Have you ever been in jail, prison or any type of correctional facility for any reason:
   Yes: _________  No: _______
   If yes, explain when and where charged: ______________________________________

17. Have you ever been placed on parole or probation? Yes: _________  No: __________

18. Have you ever caused the death of another person: Yes: _________  No: __________

19. Have you ever accompanied others while they engaged in any criminal act:
   Yes: _________  No: _______
   If yes, explain: _____________________________________________________________

20. List all military service (include branch, exact entrance and discharge dates and type of discharge):

21. Were you honorable discharged from the military? Yes: _________  No.: __________
    If no, fully explain type of discharge: ________________________________

22. Were you ever in a Reserve or National Guard Unit? Yes: _________  No: __________
    If yes, give exact dates and locations of unit: _______________________________
23. Have you ever been arrested for any drug violation(s)? Yes: ______ No: _______________

24. Have you ever violated the law by the use of the following drugs without a prescription (do not respond yes if you lawfully used any of the following as prescribed for you by a physician)?

   Marijuana: __________   Explain: ____________________________________________

   L.S.D.: __________     Explain: ____________________________________________

   Cocaine: __________   Explain: ____________________________________________

   Heroine: __________   Explain: ____________________________________________

   Amphetamines: _______ Explain: ____________________________________________

   Barbiturates: _______ Explain: ____________________________________________

   Crack: __________     Explain: ____________________________________________

   Any other drug: _______ Explain: ____________________________________________

**OTHER**

25. How did you hear about the Citizen’s Police Academy and why are you interested in attending:

___________________________________________________________________________

___________________________________________________________________________

26. Do you have any scheduling problems that would interfere with twelve (12) weeks of training on Thursday nights from 6:30 pm till 9:30 pm?

___________________________________________________________________________

___________________________________________________________________________
List three (3) personal references (include complete names, addresses, zip codes, phone numbers and area codes).

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I certify that all answers to the above questions are true and I understand that any misstatement of material facts in this questionnaire will be cause for disqualification from participation. I understand that the CPA Coordinator reserves the right to terminate me from the Citizens Police Academy at any time. By signing this, I also authorize the Knoxville Police Department to conduct a criminal history background check on my person:

______________________________  _______________________
Signature                        Date
Send CPA application to:

EMAIL:  mgoldsberry@knoxvilletn.gov

Or

FAX:  865-215-1313

Or

POSTAL MAIL:
Knoxville Police Academy
CPA/Training Unit
800 Howard Baker Jr. Ave.
Knoxville, TN 37915