

# APPLICATION FOR BASIC TRAINING

# F-5

CHECK ONE: <input type="checkbox"/> Police <input type="checkbox"/> Correctional <input type="checkbox"/> Probation/Parole		ACADEMY: <input type="checkbox"/> APSC Recert Dates:	
ACADEMY: <input type="checkbox"/> ALET Dates:		ACADEMY: <input type="checkbox"/> APD Dates:	ACADEMY: <input type="checkbox"/> UAF CTC Dates:
ACADEMY: <input type="checkbox"/> Municipal Correctional Dates:		ACADEMY: <input type="checkbox"/> Correctional <input type="checkbox"/> Probation/Parole Dates:	
Name ( <i>Last, First, Middle</i> )		Agency:	
Date of Birth:		Agency Address:	
Rank:		Vehicle Operator's License Number: Expiration Date:	
Height:	Weight:	Date of Hire:	Applicant Email Address:
Date of Last Physical Examination:		Limitations Indicated by Physical Exam:	
Current Assignment:		Previous Basic Law Enforcement Training:	

**The following documents must accompany this application (unless previously provided to APSC).**

- A. Health Questionnaire (F-2A)      B. Medical Exam Report (F-2B)      C. Personal History Statement (F-3)**  
**D. Psychological Examination Report (F-11, unless an M.C.O.)      E. CJIS Clearance Form** *(sent to DPS for ALET attendance)*

APPLICANT	
1. Have you ever been convicted of a firearms violation? <input type="checkbox"/> Yes <input type="checkbox"/> No	2. Have you ever been convicted of a felony or a crime, which limits or prevents you from possessing a firearm?  <input type="checkbox"/> Yes <input type="checkbox"/> No
<p>I release the sponsoring agency and other departments officially connected or associated with this training program from liability in case of illness or accident. I acknowledge that information contained on this form will be used by the council for purposes of determining my eligibility and qualifications for training, employment, and certification.</p> <p><b>I swear and affirm, under penalty or PERJURY, that the foregoing is true and accurate to the best of my knowledge.</b></p> <p>Done at _____, Alaska on the _____ day of _____, 20_____.</p> <p style="text-align: right;">SWORN TO AND SUBSCRIBED before me on this _____ day of _____, 20_____.</p> <p>Applicant _____</p> <p style="text-align: right;">_____ Notary Public in and for Alaska</p> <p style="text-align: right;">My Commission Expires: _____</p>	
DEPARTMENT HEAD	
I certify that this applicant has met the minimum employment standards and approve this application.	
_____ Department Head Signature	_____ Printed Name/Title
_____ Date	
APSC Use:	