

Alaska Department of Public Safety

Alaska State Troopers

Citizen Academy

KENAI PENINSULA – A DETACHMENT

Application for Admission



Amanda Price
Commissioner
Department of Public Safety

Colonel Barry Wilson
Director
Alaska State Troopers

Alaska State Trooper Citizen Academy
Coordinator Mallory Millay

Telephone: (907) 260-2701 E-Mail: mallory.millay@alaska.gov

**State of Alaska
Department of Public Safety
Alaska State Trooper Citizen Academy**

WAIVER AND AUTHORIZATION TO RELEASE INFORMATION

I authorize you to furnish the Department of Public Safety with any and all information that you have concerning me, my work records, my reputation, and my military service records. Information of a confidential or privileged nature may be included. Your reply will be used to assist in determining my qualifications and fitness for the position I am seeking. I further understand that the information you furnish will not be disclosed to any person not connected with the Department of Public Safety, including myself.

I understand my rights under Title 5, United States Code, Section 552A, the Privacy Act of 1974, and waive those rights with the understanding that information furnished will be used by the Department of Public Safety and retained by them in confidence.

I hereby release you, your organization and others from any liability or damage which may result from furnishing the information requested.

Applicant's or Guardian's Signature

Date

NOTE: A photocopy reproduction of this request shall be for all intents and purposes as valid as the original. You may retain this form in your files.

This application may be used until ***April 10, 2020***

Submit with Application

You must be able to answer YES to all of the following questions. If you cannot answer YES to all, your application will not be processed. Please circle your response.

A. Are you a resident of the State of Alaska? YES NO

B. Would you be willing to commit three hours a week for ten weeks on the days and times outlined on the attached information sheet? YES NO

C. Are you at least 16 years of age? YES NO

D. It is important that Citizen Academy participants have not recently engaged in or expect to engage in any activity that is criminal, unethical, or improper in nature that might publicly embarrass or cause problems for other Citizen Academy participants or the Alaska State Troopers. Do you meet this requirement? YES NO

E. As a Citizen Academy participant, you may be observing state troopers and other public safety personnel engage in activities that might involve the use of physical force and the rendering of emergency medical care while working in inclement weather conditions, and in situations that demand confidentiality. Would you be able to maintain confidentiality, follow verbal directions and assist public safety personnel if directed to do so? YES NO

NAME: _____
Last First Middle Nickname

CURRENT RESIDENCE ADDRESS: _____
Street City//State/Zip

CURRENT MAILING ADDRESS: _____
Street/P.O. Box City/State/Zip

TELEPHONE NUMBERS (please list all that apply):
Residence _____ Work _____ Message _____ Cell _____
Pager _____ E-Mail (optional) _____

DATE OF BIRTH: ____/____/____

DRIVERS LICENSE/ID NUMBER: _____ STATE: _____

NOTE: A past criminal record alone DOES NOT prohibit an individual from participating.

CRIMINAL HISTORY: Have you ever been arrested and/or convicted of a crime other than a traffic infraction? YES NO

If YES, please explain here:

Dates	Location of Occurrence	Crime
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Have you ever applied for the Alaska State Trooper Citizen Academy in the past ? YES NO
If YES, when? _____

1. Please describe your employment history.

2. Please describe your education and training:

3. Briefly list your current interests, hobbies, professional or personal activities. If you are currently active with a neighborhood community or civic organization, please list below:

4. Why would you like to participate?

5. Please describe something that police do that you don't understand. Perhaps this is something that happened to you, you observed, saw on television or read about:

6. Have you had mostly positive or negative experiences with the police? (Circle one. Does not have to be limited to the Alaska State Troopers). Please describe one positive or negative experience.

7. There is always room for improvement. Please describe something you feel the Alaska State Troopers could improve upon.

Please list a personal reference (other than a relative):

Name

Complete Address

Phone

Relationship to Applicant: _____

Is there any other information you would like to provide about yourself which you think might be helpful?

I understand that the Alaska State Trooper Citizen Academy is a ten week program with classes meeting as described on the instruction page. Due to the class size being limited, I understand the importance of my commitment to attend all of the classes. Furthermore, I attest that the above information provided by me is true and accurate to the best of my knowledge and authorize the State of Alaska to conduct a background and criminal history check on me.

SIGNATURE OF APPLICANT OR GUARDIAN

DATE

RETURN COMPLETED APPLICATION TO:

AST Citizen Academy
 Alaska State Troopers
 Mallory Millay
 46333 Kalifornsky Beach Road
 Soldotna, AK 99669

Can be e-mailed to mallory.millay@alaska.gov or faxed to 262-2889

FOR AST USE ONLY

DATE RECEIVED: _____ DATE BACKGROUND COMPLETED: _____ BY: _____

ACCEPTED: YES ___ NO ___ REASON FOR DENIAL: _____

DATE NOTIFIED: _____ VIA: LETTER: _____ PHONE: _____ BY: _____