



## KNOXVILLE POLICE DEPARTMENT CITIZENS' POLICE ACADEMY

### 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 consecutive Thursday evenings from 6:30 p.m. to 9:30 p.m. at the Knoxville Police Department Training Academy (Moses Center.)
- 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 Susan Coker**  
Phone: **865-215-1303**
- 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.



## **KNOXVILLE POLICE DEPARTMENT CITIZENS' POLICE ACADEMY**

### **Citizens' Police Academy Application**

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### **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 in 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 Campaigns
  - d. Violence Prevention
  - e. Mentoring Programs for Youth
  - f. Victim Awareness
  - g. Victim Support



# KNOXVILLE POLICE DEPARTMENT

## CPA Application

The intentional omission or falsification of any material fact is cause for disqualification from participation.

### NAME AND ADDRESS

1. List current complete name and address.

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Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Pager: \_\_\_\_\_

Is Your number unlisted/ private Yes \_\_\_\_\_ No \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

List other addresses for the past ten years.

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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:

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### **PERSONAL HISTORY**

**EDUCATION**

3. High School Graduate?

Yes\_\_\_\_\_ No\_\_\_\_\_ Year\_\_\_\_\_ GED\_\_\_\_\_ Year\_\_\_\_\_

Name of High School and Location:

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4. College Graduate?

Yes\_\_\_\_\_ No\_\_\_\_\_ Year\_\_\_\_\_ Degree\_\_\_\_\_

Name of College:\_\_\_\_\_

If yes, appropriate number of credits:\_\_\_\_\_

5. Other technical training related to law enforcement\_\_\_\_\_

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Other technical training\_\_\_\_\_

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Hobbies and Interests\_\_\_\_\_

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Community Activities\_\_\_\_\_

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Do you have any training, education, or experience that you could contribute to the

Department? If so, what?\_\_\_\_\_

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**RELATIVES**

6. Single\_\_\_\_\_ Married\_\_\_\_\_ Divorced\_\_\_\_\_ Separated\_\_\_\_\_ Widowed\_\_\_\_\_

Spouse's Name\_\_\_\_\_

Spouse's Occupation\_\_\_\_\_

Former Spouse's Name\_\_\_\_\_

**PERSONAL HISTORY**

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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.

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**PERSONAL HISTORY**

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**DRIVING RECORD**

11. Do you have a **current valid drivers license**? Yes\_\_\_\_\_ No\_\_\_\_\_

License Number\_\_\_\_\_ Class of License\_\_\_\_\_ State\_\_\_\_\_

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

Yes\_\_\_\_\_ No\_\_\_\_\_ If yes, explain:\_\_\_\_\_

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**ARREST/CRIMINAL BACKGROUND**

13. (a.) 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)\_\_\_\_\_

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(b.) If your answer to any of the above is yes, please explain: \_\_\_\_\_

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14. Have you ever been arrested as an adult? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, explain (when and where charged):

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Have you had any other encounters with Law Enforcement Officers (good or bad)? \_\_\_\_

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### **PERSONAL HISTORY**

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15. Have you ever been served a summons to appear in court? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, explain (when and where charged):

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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)

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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?  
If yes, explain:

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

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**PERSONAL HISTORY**

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

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22. Were you ever in a Reserve or National Guard Unit? Yes\_\_\_\_\_ No\_\_\_\_\_  
If yes, give exact dates and location of unit:

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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_____
Heroin	_____	Explain_____
Amphetamines	_____	Explain_____
Barbiturates	_____	Explain_____
Crack	_____	Explain_____
Any other drug	_____	Explain_____

25. Have you ever been convicted of possession or the user of any of the above listed drugs?  
 Yes\_\_\_\_\_ No\_\_\_\_\_ If yes, explain:

\_\_\_\_\_  
 \_\_\_\_\_

**PERSONAL HISTORY**

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26. Have you ever sold any type of illegal drugs? Yes\_\_\_\_\_ No\_\_\_\_\_  
 If yes, explain:

\_\_\_\_\_  
 \_\_\_\_\_

27. Have you ever bought any type of illegal drug? Yes\_\_\_\_\_ No\_\_\_\_\_  
 If yes, explain how often and largest amount ever purchased.

\_\_\_\_\_  
 \_\_\_\_\_

28. Are you currently using any type of illegal drugs? Yes\_\_\_\_\_ No\_\_\_\_\_  
 If yes, what type of drug?

\_\_\_\_\_  
 \_\_\_\_\_

**OTHER**

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29. How did you hear about the Citizen's Police Academy & why are you interested in attending?

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30. Do you have any scheduling problems that would interfere with 12 weeks of training on Thursday nights, 6:30 – 9:30?

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

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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 Citizen's 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