

HORRY COUNTY POLICE DEPARTMENT

Dedicated to Providing Comprehensive, Quality Law Enforcement

2560 North Main Street, Suite 7 - Conway, SC 29526 - Tel: 843-915-5350 - Fax: 843-248-1886

Citizens Police Academy Application

The Citizens Police Academy is a nine-week program, which meets on Monday evenings from 6-8 p.m. Attendance is the most important factor in achieving the goals of the program. Two absences are permitted; however, full attendance is encouraged.

Signature of Acknowledgement: Horry County is an Equal Opportunity Employer and applies those same principles to selection of participants in the Citizens Police Academy. Selection is done without regard to race, religion, color, national origin, sex, age, political affiliation or disability.

ADA NOTICE: HORRY COUNTY POLICE DEPARTMENT WILL NOT DISCRIMINATE AGAINST QUALIFIED INDIVIDUALS ON THE BASIS OF DISABILITY IN ITS SERVICES, PROGRAMS OR ACTIVITIES. THE COUNTY WILL MAKE ALL MODIFICATIONS TO POLICIES AND PROGRAMS TO ENSURE THAT PEOPLE WITH DISABILITIES HAVE AN EQUAL OPPORTUNITY TO ENJOY ITS PROGRAMS, SERVICES AND ACTIVITIES.

Date submitted:
IMPORTANT: This training is not designed to certify citizens to perform law enforcement services. The purpose of the program is to enhance community relations and provide citizens with insight into the criminal justice system. Class size is limited. Residents and citizens who live and/work within Horry County lines are given first priority.
I hereby authorize employees of Horry County Police Department to make an examination of all the information that I provide for the purpose of evaluating this application.
I understand that I may be rejected for submitting incomplete or false information.
Please initial each statement: I certify that the statements that I make on this application are true and complete.



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Preferred Name on Class Document:
Street Address: City, State, Zip:
Phone #:
Email:
Date of Birth (mm/dd/year):
Social Security #:
Do you live within Horry County? Yes \square No \square
Do you work within Horry County? Yes \square No \square
If yes, current employer/job title: Business Address:
High School, City:
College, City: If yes, provide major:
South Carolina Driver's License #:
Has your license ever been suspended or revoked? Yes \square No \square
Have you ever been convicted of a crime (excluding traffic)? Yes \Box No \Box
What experience have you had with law enforcement? Explain.



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What is the extent of your community involvement?
Why do you desire to participate in this program?
How will the community and police benefit from your participation?
Have you ever applied for this program before? Yes \square No \square What do you expect to learn from this experience?
Shirt size:
Type name as electronic signature:
Date:

Submit completed form via email to HCPDregulatory@horrycountysc. gov