

**Delaware Police Department
Citizen Police Academy
Release of Information
And Statement of Consent**

All Citizen Police Academy applicants will be subject to a background check.
The following is a list of some of the offenses which may disqualify
You from participation in this program:

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- Felony Offenses
 - Weapons Offenses
 - Assault Offenses
 - Drug Offenses within the last three years
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*All decisions regarding admissions
Are at the discretion of the Program Director.
All decisions are FINAL*

I, _____ do hereby consent to the background investigation and authorize a review of all records, or any part thereof, concerning myself, by and to a duly authorized agent of the Delaware Police Department, Delaware, Ohio, whether the said record are public or private, and including those that may be deemed to be of a privileged or confidential nature. I understand that all information will be kept confidential. I also understand that should any statement I have made prove to be false, misleading, or erroneous, it may result in rejection of my application or discharge from the Citizen Academy.

Signature _____ Date _____

**RETURN THIS FORM WITH APPLICATION TO:
Delaware Police Department
Attn: Ptl. Rita Mendel
70 N. Union St.
Delaware, OH 43015**
