

Brown County Sheriff's Office Citizens Academy Application



Name: _____
First Middle Initial Last

Address: _____
Number and Street

City State Zip Code

Previous Address (last 5 years):

Number and Street

City State Zip Code

Telephone Number: (____) ____

Date of Birth: _____

Email Address: _____

Employer: _____

Employer Address: _____
Number and Street

City State Zip Code

Employer Phone: (____) ____

Prior to being accepted into the Citizens Academy a background investigation must be completed by the Brown County Sheriff's Office. Do you authorize a deputy from the Brown County Sheriff's Office to conduct a background investigation? Yes No

Driver's License #: _____ State: _____ Male Female

Shirt Size: _____ (Women please indicate if you would like a male or female shirt)

You will be notified early September of the status of your application for the Fall class.

Applicants Signature: _____
(Type name here indicating your signature)

Please submit Application to: Sara McGuire 920-448-4243 or email her at McGuire_SE@co.brown.wi.us.

20 Committed applicants required for the academy to run.

Brown County Sheriff's Office
2684 Development Drive
Green Bay, WI 54311