

**Norman Police Department
Public Safety Cadet Application**

Last Name: _____ **First Name:** _____

Middle Name: _____ **Legal Nickname:** _____

Previous Names: _____

Social Security Number: _____ - _____ - _____ **Date of Birth:** ____/____/____

Driver's License Number: _____ **State:** _____

Place of Birth: _____

Current Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone #: Home: _____ - _____ - _____ **Cell:** _____ - _____ - _____

E-Mail Address: _____

Current Employer: _____

Work Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone Number: _____ - _____ - _____

Current School: _____

GPA: _____ (Must maintain at least a 2.0) **Year/Grade:** _____

Mother's Last Name: _____ **First:** _____

Current Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone #: Home: _____ - _____ - _____ **Other:** _____ - _____ - _____

Father's Last Name: _____ **First:** _____

Current Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone #: Home: _____ - _____ - _____ **Other:** _____ - _____ - _____

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Other People Living In Your Home: (Include Name, Date of Birth, and Relationship)

Prior public safety programs / Explorer Posts: (List all prior Public Safety Programs or explorer posts you were a member of)

Reference: (List 2 adults who are not related to you) (You may attach written references)

#1) Name: Last: _____ **First:** _____

Relationship: _____ **Occupation:** _____

Current Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone #: Home: _____ - _____ - _____ **Other:** _____ - _____ - _____

#2) Name: Last: _____ **First:** _____

Relationship: _____ **Occupation:** _____

Current Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone #: Home: _____ - _____ - _____ **Other:** _____ - _____ - _____

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Have you ever been arrested for anything other than a traffic violation? Yes No

If Yes, Explain: (Include the Arresting Agency) _____

Are you, or have you ever been, associated with any groups, organizations, or gangs in which its members participate in criminal activity? Yes No

If Yes, Explain: (Include the Arresting Agency) _____

List all of your traffic citations and dates they occurred, if any: (Approximate Date)

Do you understand that a Background Check will be done to determine your suitability to be a member of the Norman Police Public Safety Recruits Yes No

Please feel free to attach any additional sheets if you wish to tell us more about yourself.

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I, _____, understand the mission of the Norman Police Department and the possible dangers involved in the learning of different aspects of the criminal justice system by being a member of this Law Enforcement Program. Knowing that some of the things I may learn by being involved in this program are confidential and involve a police officer's safety, I knowingly give my permission for a background investigation on myself.

Signature: _____ Date: _____

Print Full Name: _____

Must complete if under 18 years of age:

I, _____, being the parent and/or legal guardian of _____, who is listed above, give my permission for a Background Investigation on _____. I understand the confidentiality and safety problems and know that none of the information found during the investigation will be released to anyone unless ordered by the court.

Signature: _____ Date: _____

Print Full Name: _____