



CITIZENS' ACADEMY APPLICATION

Personal Information

First Name

Last Name

Street:

City:

State:

Zip:

Driver's License Number

Date of Birth

Social Security Number

Mobile Phone

Emergency Contact

Name

Mobile Phone

Relationship

City

Do you belong to any inmate advocacy groups or political organizations? If so, please list them


Do you have any family members currently employed by the Department of Corrections? If so, please list their name(s) and DOB

Do you have any family members, friends, or significant other(s) currently incarcerated or on probation/parole (including yourself)? Or within the last 10 years? If so, please list their name(s) and DOB

Why would you like to attend Citizens' Academy?

What would you most like to learn?

PRIVACY NOTICE: THE PERSONAL IDENTIFYING INFORMATION PROVIDED ON THIS FORM WILL BE USED TO OBTAIN A BACKGROUND CHECK FROM THE UTAH BUREAU OF CRIMINAL IDENTIFICATION (UBCI). THIS IS CRITICAL TO ENSURING SECURITY AND PROTECTING SENSITIVE INFORMATION. WITHOUT A BACKGROUND CHECK FROM UBCI YOU WILL NOT BE ADMITTED. THE INFORMATION YOU PROVIDE WILL NOT BE SHARED, SOLD OR USED FOR ANY OTHER PURPOSE. TO LEARN MORE ABOUT THE UTAH DEPARTMENT OF CORRECTIONS PRIVACY POLICY, PLEASE VISIT [HTTPS://CORRECTIONS.UTAH.GOV/PRIVACY-POLICY/](https://corrections.utah.gov/privacy-policy/)

 I certify that all answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application as may be necessary for acceptance into the program.


Signature


Date