



# Citizens Academy Application

**Eligibility Requirements: To be considered for participation in the Citizens Academy, an applicant must be over the age of 18. The deadline for application submittal is January 13, 2022.**

## General Information

Name: \_\_\_\_\_  
Mr. Ms. Mrs. (First) (Last)

Home Address: \_\_\_\_\_  
(please include the zip code)

Business Address (If Applicable): \_\_\_\_\_  
(please include the zip code)

Home Telephone: \_\_\_\_\_ Work Telephone: \_\_\_\_\_  
Cellular Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

## Optional Information

Occupation: \_\_\_\_\_  
Employer: \_\_\_\_\_

## Emergency Contact Information

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

## Why do you wish to participate in the Citizens Academy?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## How did you hear about the Citizens Academy?

\_\_\_\_\_  
\_\_\_\_\_

## What do you hope to gain/learn from participation in the Citizens Academy?

\_\_\_\_\_  
\_\_\_\_\_

I, the undersigned applicant, certify that the foregoing information is true and complete to the best of my knowledge and belief.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please check here for Vegetarian meal preference.

T-shirt Size \_\_\_\_\_

***If you need special accommodation, please contact Lisa Holder at 407.688.5019 or [Lisa.Holder@sanfordfl.gov](mailto:Lisa.Holder@sanfordfl.gov) upon acceptance into the class. [www.sanfordfl.gov](http://www.sanfordfl.gov).***