



# Citizen's Fire Academy Application

Name \_\_\_\_\_ Phone: \_\_\_\_\_

Address (including zip code) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Operator's License Number \_\_\_\_\_

Have you ever been convicted of a felony? No \_\_\_\_ Yes \_\_\_\_

If yes, please explain: \_\_\_\_\_

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

P19-017



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