



Westport Police Department  
 PO Box 505  
 740 North Montesano Street  
 Westport, WA 98595  
 Phone: 360.268.9197  
 Fax: 360.268.1363



Grays Harbor County Sheriff's Office  
 PO Box 630  
 100 West Broadway, Suite 3  
 Montesano, WA 98563  
 Phone: 360.249.3711  
 Fax: 360.249.3288

## CITIZEN ACADEMY APPLICATION AND APPROVAL FOR BACKGROUND INVESTIGATION, CRIMINAL HISTORY, AND DRIVERS LICENSE CHECK

As an applicant for the South Beach Citizen Academy, I realize that a background investigation, criminal history, and driver's license check will be conducted before I can attend. I hereby authorize the Westport Police Department or the Grays Harbor Sheriff's Office to search any law enforcement database to conduct it.

List ALL names you have ever used including maiden name:

Name:

\_\_\_\_\_  
 (PRINT) LAST, FIRST MIDDLE

Name:

\_\_\_\_\_  
 (PRINT) LAST, FIRST MIDDLE

Name:

\_\_\_\_\_  
 (PRINT) LAST, FIRST MIDDLE

Address: \_\_\_\_\_ Apt.: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Soc. Sec. # \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Drivers License Number: \_\_\_\_\_

Sex: \_\_\_\_\_ Race: \_\_\_\_\_

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

\_\_\_\_\_  
 (Print Name)

Subscribed and sworn to me this, \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_

\_\_\_\_\_  
 (Notary Signature)

\_\_\_\_\_  
 (Expires)