

PCAB APPLICATION

*Position(s) Applying for:

- Ward 1 – Police Community Advisory Board Member
- Ward 2 – Police Community Advisory Board Member
- Ward 3 – Police Community Advisory Board Member
- Ward 4 – Police Community Advisory Board Member
- Ward 5 – Police Community Advisory Board Member
- Ward 6 – Police Community Advisory Board Member
- Mayor – Police Community Advisory Board Member

*First Name: _____ *Last Name: _____

*DOB: _____ *Email Address: _____

*Phone Number: _____ Secondary Number: _____

*Home Address: _____

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

*How long have you lived at this address (estimated dates are okay)? _____

*Are you or have you ever been employed? _____ *Education Level: _____

*Interests:

- Administration
- Events
- Crime Prevention
- Youth Monitoring
- Juvenile Justice
- Record Room
- Newsletter Production
- Volunteer Coordination
- Community Policing
- Reducing Violent Crime
- Cultural Awareness
- None of these interest me.

*Explain why you are interested in being on the Police Community Advisory Board?

*Are you involved in a Neighborhood Association?

*Do you currently work with any community organizations?

*Emergency Contact: _____ *Relationship to You: _____

*Phone Number: _____

*Address: _____

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

By submitting this application, I affirm that I am not a convicted felon and the facts set forth in it are true and complete. I understand that if I am selected as a member of the Midwest City Police Community Advisory Board, my time is voluntary and I will not be compensated monetarily for my service. I also understand the bi-monthly commitment to appear at the Advisory Board meetings, as well as other duties which may be required of me. Additionally, I understand that if I am accepted as an applicant, any false statements, omissions, or other misrepresentations made by me on this application may result in immediate dismissal.

*Do you agree to these terms? _____

Signature

Date