

SAN LUIS OBISPO COUNTY SHERIFF'S OFFICE

Crime Prevention Unit 1585 Kansas Ave. San Luis Obispo, CA 93405 (805) 781-4578 bswain@co.slo.ca.us

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SHERIFF'S CITIZEN ACADEMY August-November (dates TBD)

The Sheriff's Citizen Academy provides community members with an inside look at the Sheriff's Office and all facets of law enforcement. During the academy, students will be introduced to Sheriff's Office operations and special units. Tours will be conducted at the Jail, Court Services, Dispatch/911 Center, and the Range. Topics include criminal and civil law, investigations, patrol procedures, crime prevention, drug enforcement/education, gang enforcement/education, and much more!! As part of the curriculum, students will be scheduled to ride along with a patrol deputy and to participate in demonstrations by a Range Master at the Virtra shooting simulator.

The purpose of the academy is to give citizens an overview of the Sheriff's Office policies and procedures. The Curriculum and teaching methods are similar to the traditional law enforcement academy, but the weekly sessions are not designed to make the participant a law enforcement officer. Opportunities to receive further training as part of the Sheriff's Office Auxiliary Volunteer Patrol (S.A.V.P.) will be offered but is not a requirement to attend.

The Sheriff's Citizen Academy generally spans an 11-week period, meeting from 6pm-9pm, once per week. Family and friends are welcome to attend a graduation ceremony held in the final week.

Potential candidates for the Sheriff's Citizen Academy must meet the following criteria:

- Live or work in San Luis Obispo County
- Must be at least 18 years of age
- No Prior felony convictions
- No misdemeanor arrests within one year
- Valid Driver's License or ID Card

To attend the Sheriff's Citizen Academy, please fill out the following application and mail or email to:

Academy Coordinator, Brandy Swain 1585 Kansas Ave., San Luis Obispo, CA., 93405 office: (805)781-4578

bswain@co.slo.ca.us



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SHERIFF'S CITIZEN ACADEMY

Full Name:	Today's Date:	
Date of Birth:	Place of Birth: _	
Home Address:		
City:	State:	Zip:
Place of Employment:		_ Job Title:
Phone Number:	E-Mail Address: _	
Driver's License Number:		State Issued:
Height: Weight:	Hair Color:	Eye Color:
Who referred you to the Acader	my:	
Physical Limitations, if any:		
Prior Arrests or Convi		
(Answering "Yes" to the abo	ove auestions may not disc	qualify a participant.

(Answering "Yes" to the above questions may not disqualify a participant, but must be revealed).

Note that applicants will be background checked for law enforcement use only

Please return the following application by mail, or email to:

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