



**SALEM POLICE DEPARTMENT CITIZEN POLICE ACADEMY  
AUTHORIZATION TO CONDUCT A  
BACKGROUND INVESTIGATION**

As an applicant to participate in the Salem Police Department's Citizen Police Academy, I, hereby, authorize the Salem Police Department to conduct a criminal history background investigation.

I understand such a background investigation is being conducted due to the content and location of the classes offered as part of the academy.

I understand all available police and criminal records will be checked and the information will be used in determining my eligibility to attend the Citizen Police Academy. All information will remain confidential as required by state and federal statutes.

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SIGNATURE

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PRINTED NAME

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DATE