

MARTA POLICE DEPARTMENT
CITIZENS POLICE ACADEMY
EST. February 1999



“UNDERSTANDING THROUGH EDUCATION”

MARTA Police Department Citizens Police Academy



The Metro Atlanta Rapid Transit Authority Police Department is now accepting applications for its Citizens Police Academy.

The Citizens Police Academy is a ten-week program designed to provide a unique glimpse “behind the badge.” The Academy offers the metro area citizens a better understanding of the MARTA Police Department and a greater awareness of the daily challenges faced by its officers.

Attendees will learn about departmental resources and programs and, more importantly, the men and women who comprise the MARTA Police Department. Classes will be a combination of lectures and interactive activities, with topics such as special operations, 911 communications, firearm use and safety, crime prevention, crime scene investigation and internal affairs.

The Citizens Police Academy is usually held on Tuesday evenings. Classes will meet from 6 p.m. to 9:30 p.m. Class locations will be held at various police facilities throughout the MARTA agency. Firearms and Use of Force training is scheduled on a Saturday.

Participation in the program is free. Applicants are required to be 18 years of age and must provide their own transportation to and from training. Acceptance into the program is subject to review of the applicant’s criminal record and police contact history.

For more information or an application form, please call 404-848-3670.



MARTA Police Department Citizens Police Academy Application



Name: _____ Date: _____

Address: _____

City/Zip: _____ Date of Birth: _____

Sex: Male Female Race: _____ MARTA Employee: yes no

Occupation: _____ U.S. Citizen: yes no

E-mail Address: _____ SS#: _____

Drivers License#: _____ State: _____

Home Phone: _____ Work Phone: _____

Emergency Contact: _____

Community Group Affiliation (if any): _____

Why do you wish to attend the Citizen's Police Academy? _____

How did you hear about the Citizen's Police Academy? _____

List two references:

1. _____ Phone Number: _____

2. _____ Phone Number: _____

Signature: _____ Date: _____

Please mail completed form to:

Officer Natalie Johnson, Coordinator
Citizen's Police Academy
2424 Piedmont Road, N.E.
Atlanta, GA 30324

Questions call 404-848-3670 or fax application to: 404 848-5005

Or e-mail: [nhjohnson@itsmarta.com](mailto:njohnson@itsmarta.com)



Consent and Authorization for Release of Information

I, hereby, authorize and request that you release to an authorized representative of the MARTA Police Department all requested pertinent information concerning my employment history, driver's license history, credit history or criminal history record which may be in the files of any state or local criminal justice agency in Georgia.

It is my understanding that this information will be used by the MARTA Police Department **only** for official purposes and will be kept **confidential**. This Consent and Authorization shall remain in effect from the date of signature until such time as my application is rejected or, if employed, my employment is terminated.

I relieve MARTA of any and all liabilities.

Full Printed Name

Drivers License Number

Street Address

Apt #

City

State

Zip Code

Sex

Race

Date of Birth

Social Security Number

Applicant's Signature

Notary Public

Date

Commission Expiration

Recruiting Officer