

Citizen Observer's Program Application

Name:	A STATE OF THE STA	N. Charles	
	(Full Name) (Last, First, Mi		
Address:	(Edse) Til se, ivii		
City:	State:	Zip Code:	
Cell Phone #:	Work	Phone #:	
How long have you live	ed at your current a	ddress:	
How long have you be	en a resident of Wa	ılker C <mark>oun</mark> ty:	
List Home Address for	the past three (3) Y	ears:	
2.			77
3			
Date of Birth:	Place o	f Birth:	
Social Security #:	Driv	er's License #:	



Walker County Sheriff's Office 2001 2nd Ave Jasper AL, 35501 (205)302-6464 Sheriff Nick Smith (Application Continued)

Height:′	″ Weight:	lbs Hair:	Eyes:
	Sex:	Race:	
		ons that may limit y	your performance during a
	A Marian Andrews	MERY	
Name of Spo	ouse:		
Number of D	Dependent Children	ERCOS	
	GARGIONIST PARTICIPATION CONTROL FINDS	placed under bondegulations:	l, charged or cited for any If so Explain:
	WAILKIDE	COUNTY	
	With the production of the control o	き、3 1、東の下級。まで、現場ではまる。 Lassacratic de astronomia deducación e an	and the second s



Have you ever served in the United Stated of America or		rces or any reserve component of the
Branch:		
Dates of Service: From	To	Unit:
Dates of Service: From		Unit:
Dates of Service: From	To	Unit:
Type of Discharge:	AG .	
Are you now a member of ar		
If yes, Name of the Reserve C	A STATE OF	The state of the s
Are you presently employ contacted in regards to this a		if so may your employer be
Have you ever been disc position: if yes e		or requested to resign from any
The second of the principal of the second of	a minigroup (S)	and the second server as several and second



(Application Continued)

List your work experience starting with your current or last job and work back in chronological order for the past (2) years:

±.		
Employer:		
Address:		
Employer Phone #:		
Name of Supervisor:		
From:	To:	
2.	STILL	
Employer:	A Comment	
Address:	5 11 111	
Employer Phone #:	7	
Name of Supervisor:	14-00	4/
From:	To:	
3.		
Employer:		
Address:		
Employer Phone #:	KENELO OFFINING	AUNT
Name of Supervisor:		
From:	To:	A CONTRACTOR



List all religious, civic, fraternal, etc Organizations to	
have belonged for the past (5) five years:	**
	- Section - Sect
List (2) two personal references who know you well en	lough to testify to your
good character (do not list family):	
Name:	
Address:	
Phone #:	
Phone #: Employer:	and the second second
How long have you known this person:	
Name:	
Address:	
Phone #:	
Employer:	
How long have you known this person:	



From:	To:	was a degree obtained:
If so, what d	egree:	Action 1997 Action 1997
		VER L
2	C	
From:	To:	was a degree obtained:
If so, what d	egree:	
	A.Y.	5/11/2019/19/19
3		
	To:	was a degree obtained:
If so, what d	egree:	
List all specia	al schools, institut	es, and training centers attended. (give dates
11 15 2	AND ASSESSMENT OF THE STREET	d any certifications obtained):



	d to seek a career in a Criminal Justice related profession:
A CONTRACTOR OF THE PARTY OF TH	tail any law enforcement training or experience that you have larger that you have larger training:
	GMERICA CONTRACTOR OF THE STATE
Why are you	seeking entry into the Citizen Observer's Program:
	AVALIKERI COSTINUN, ALLA



END OF APPLICATION. IF ANY ADDITIONAL SPACE WAS NEEDED FOR QUESTIONS, PLEASE ATTACH THE ADDITIONAL SHEETS TO THIS APPLICATION.

I hereby affirm that the information in this application is true and correct, and that by applying for this program I consent to a criminal/financial background check.

Date:

WALKER COUNTY AL