

# Cheyenne Police Department Community Advisory Group Application

Applicants must complete the information below and agree to a background investigation.

**Full Name** \_\_\_\_\_

**Date of Birth** \_\_\_\_\_

**Home Address** \_\_\_\_\_

\_\_\_\_\_

**Phone Number** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**Place of Employment** \_\_\_\_\_

**Social Media Profile Name (Facebook, Twitter, etc.)** \_\_\_\_\_

\_\_\_\_\_

**Interest in CAG** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Background Consent:** By submitting this form, I give consent to the Cheyenne Police Department to conduct a background investigation.

I agree and give consent

 Please attach your background investigation report to this form before submitting it.