

## BCSO STAND Class Application

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_/\_\_/\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Emergency Contact (other than parent) Name: \_\_\_\_\_

Emergency Contact Phone Number: \_\_\_\_\_

Student's Driver's License/Permit#: \_\_\_\_\_ SS# \_\_\_\_\_

High School: \_\_\_\_\_ Grade Level: \_\_\_\_\_

I have made application to the Blount County Sheriff's Office STAND class and hereby give full authorization to the Blount County Sheriff's Office to conduct verification of the above information before I may be considered for attendance in this class. Completion of application does not guarantee I will be admitted to the class. I will be notified of my status regarding participation in the class after completion of the necessary verification. If I am selected to participate in the STAND class I will be required to follow the necessary rules and code of conduct as determined by the Blount County Sheriff's Office. If at any time my behavior is contrary to those guidelines, I may be asked to discontinue my participation in the class.

If selected, both student and guardian will both be required to sign a Release of Liability/Consent Form before enrolling in the class.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return completed application to:

Attn: Lt. Chuck Garner  
Blount County Sheriff's Office  
940 E. Lamar Alexander Pkwy.  
Maryville, TN 37804

**DEADLINE TO RETURN APPLICATION JULY 20, 2018.**