Name:		
Address:		
Home Phone:		Cell Phone:
DOB:	Email:	
Driver License #:		SSN:

## **NOTICE**

Each applicant must be willing to pass a criminal history inquiry before being allowed to enroll in the Student Internship Program.

You may direct any questions or concerns to: Master Patrol Officer Billy Shoemaker Departmental Training Coordinator 770-715-7828

bshoemaker@unioncityga.org