



Federal Bureau of Investigation Collegiate Academy Program Application

This form will be used by the FBI in determining whether you meet the criteria for the FBI Collegiate Academy program. The final determination of whether you meet the criteria for the FBI Collegiate Academy program is the responsibility of the FBI. The FBI does not discriminate on the basis of race, color, religion, sex, national origin, disability, or sexual orientation when granting access to the FBI Collegiate Academy program.

Personal Information

| | | | |
|--|--------------------------|--|---|
| Name: | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| | Last | First | Middle |
| <p>List all other names you have used, including nicknames and maiden names. If you have ever used any legally changed name, please list the time period this occurred and the circumstances. If you ever legally changed your name, please list the date, place, and court:</p> | | | |
| <input type="text"/> | | | |
| Date of Birth | <input type="text"/> | Place of Birth | <input type="text"/> |
| | | Gender | <input type="text"/> |
| Social Security Number | <input type="text"/> | Driver's License Info (State & Number) | <input type="text"/> |
| Citizenship (Country) | <input type="text"/> | Acquired By: | Birth <input type="radio"/> Marriage <input type="radio"/> Naturalization <input type="radio"/> |
| Legal Resident and/or Non-U.S. Citizen | <input type="checkbox"/> | | |
| <i>If you are a naturalized U.S. citizen, list your naturalization number as well as the date and place your naturalization occurred.</i> | | | |
| <input type="text"/> | | | |

Address/Contact Information

| | | | |
|--|----------------------|----------------------|----------------------|
| Physical Street Address (do not list a P.O. Box): | | | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Street | City | State | ZIP Code |
| Mailing Address (if different from physical address): | | | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Street | City | State | ZIP Code |
| Home Phone | <input type="text"/> | Work Phone | <input type="text"/> |
| Cell Phone | <input type="text"/> | E-Mail Address | <input type="text"/> |
| In the event of an emergency, list a relative or close associate who can be contacted: | | | |
| Name: | <input type="text"/> | Relationship | <input type="text"/> |
| | | Phone Number | <input type="text"/> |

Organization Memberships

List any organizations, associations, or community groups to which you belong:

Criminal Background Information

Have you ever been charged with or convicted of any felony offense? Yes No

Have you ever been charged with or convicted of a firearms or explosive offense? Yes No

Are there currently any charges pending against you for any criminal offense? Yes No

In the last 10 years, have you been arrested for, charged with, or convicted of any offense? Yes No

If yes, provide details, including date, place, law enforcement agency, charge, court, and disposition.

Certification and Authorization to Conduct Law Enforcement Checks

I hereby authorize the FBI to conduct a limited background investigation to include a fingerprint check of law enforcement records on me. I understand this check will include, but is not limited to, any record of charges, prosecution or convictions for criminal or civil offenses. This check will be used for the purpose of the FBI's Collegiate Academy application process. Any information obtained will be used for the purpose of providing clearance to participate in the FBI Collegiate Academy program.

Full Name (Print) _____ Full Name (Signature) _____

Date _____

Ethnicity and Race Identification (Optional)

The information collected in this section will be used only to focus outreach efforts to improve the diversity of the Collegiate Academy program. Providing this information is voluntary, and failure to do so will have no effect on the determination of whether you meet the criteria for the FBI Collegiate Academy program.

Specific Instructions: These questions are designed to identify your ethnicity and race. **Regardless of your answer to question 1, please also answer question 2.**

1. Are You Hispanic or Latino? (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

Yes No

2. Select the racial category or categories with which you most closely identify. Check all that apply.

American Indian or Alaska Native: A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.

Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent (e.g., Cambodia, China, India, Japan, Korea, Malaysia, the Philippine Islands, Thailand, and Vietnam).

Black or African-American: A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Collegiate Academy Photograph Consent/Release Form

During your participation in an FBI community outreach program event or activity, an FBI photographer may photograph the event or activity. By signing this consent/release form, you agree that your image appearing in any such photograph may be used by the FBI and the community outreach program for public affairs purposes.

I agree to release to and authorize the FBI to use any photograph containing my image, as described above, in print or electronic media including, but not limited to, the FBI's public website and social media platforms, for purposes of community outreach and public affairs

Full name (Print)

Full Name (Signature)

Date

Privacy Act Statement

The collection of information on this form is authorized by Title 28, United States Code, section 533; Title 28, Code of Federal Regulations, section 0.85; and Department of Justice Order 2600.2D, *Security Programs and Responsibilities* (June 16, 2011). Your Social Security number is requested as authorized by Executive Order 9397 (Nov. 30, 1943), as amended by E.O. 13478 (Nov. 18, 2008). The information is collected to assist the FBI in evaluating your application for the Collegiate Academy program and to maintain the security of FBI personnel, facilities, and information systems, except for the optional information regarding race and national origin, which will only be used to focus outreach efforts in order to improve the diversity of the program. Providing the requested information is voluntary; however, failure to provide the requested information—except for optional race and national origin information—may result in you not being selected to attend the FBI Collegiate Academy. The information you provide will be maintained in the FBI’s Central Records System (Justice/FBI-002), notice of which was published in the Federal Register and may be viewed at <https://www.fbi.gov/services/records-management/foipa/fbi-privacy-act-systems>. The information you provide may be used in accordance with the routine uses contained in that notice or as otherwise authorized by law.

Notice

Knowingly falsifying or concealing information required on this form will result in your application being rejected. In addition, Title 18 Section 1001 of the U.S. Code provides that knowingly falsifying or concealing a material fact may under certain circumstances constitute a felony resulting in fines and/or imprisonment.

I certify that all information provided as part of this application is true and correct to the best of my knowledge. I give my consent to use this information provided herein for the purpose of consideration into the FBI Collegiate Academy.

Full name (Print)

Full name (Signature)

Date