

**APPLICATION**  
**Civics 101 - Aberdeen Citizens Academy**  
**September - November 2014 Class**

The Town of Aberdeen's Citizens Academy Program (CAP) is a unique opportunity for citizens to learn about Aberdeen Municipal Government in order to foster a better understanding and working relationship between the two. The Citizens Academy requires a time commitment on Tuesday evenings from 5:30 p.m. to 7:30 p.m. for seven (7) weeks. Participants will be selected in a first-come, first-served basis. The class may be limited to 15 participants.

(Please print or type)

Full Name: Mr./Mrs./Ms. \_\_\_\_\_  
Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_  
E-Mail Address \_\_\_\_\_  
Employer Name & Address \_\_\_\_\_

Birth Place \_\_\_\_\_ Years Living in Aberdeen \_\_\_\_\_  
Personal History - Please tell us about yourself, i.e. interest, accomplishments, community involvement, etc.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you a member (or past member) of any Town Advisory Board? \_\_\_ No \_\_\_ Yes If "yes", which board(s)? \_\_\_\_\_  
Years of Service \_\_\_\_\_

Please list any civic, professional, business, religious, social, or other organizations in which you are a member. If new to Aberdeen, you may include activities in your prior location.

<u>Organization</u>	<u>Years as Member</u>	<u>Position Held</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Briefly discuss what you hope to learn as a participant in the Citizens Academy Program and how you anticipate using the information:  
\_\_\_\_\_  
\_\_\_\_\_

Are you planning to attend all sessions? \_\_\_ Yes \_\_\_ No If no, please explain:  
\_\_\_\_\_

Please return to: Regina Rosy  
Town of Aberdeen  
P.O. Box 785  
Aberdeen, NC 28315

Phone: (910) 944-4515

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date