



UNIVERSITY OF CALIFORNIA, MERCED
POLICE DEPARTMENT

R.A.D. APPLICATION

(Please complete the entire form; Sign and date it, and return it to the UC Merced Police Department; Placement in course is based on availability and order of receipt of application)



Name (Last, First, M.I.): _____

Address: _____

City: _____ ZIP: _____

Telephone: _____ Cell Phone: _____

E-mail: _____

Date of Birth: _____ Sex: Male ___ Female ___

Driver's License/ID Card #: _____

Occupation: _____ Employer: _____

Why would you like to attend?

Are you a UC Merced Student? Yes ___ No ___

Shirt size? Small ___ Medium ___ Large ___ X-large ___

If you are not eligible for attendance in the current R.A.D. course, would you be interested in being placed on a waiting list for the next course based on submission order of your application? Yes ___ No ___

Signature of Applicant: _____ Date: _____

Applicants Printed Name: _____

For Office Use Only

Date received: _____ Received by: _____ Accept: ___ Reject: ___

Application #: _____ Eligible for next course? Yes ___ No ___

Rescheduled? Yes ___ No ___ Anticipated course attendance? _____