**Yuba College Public Safety Center**

**2088 N. Beale Rd., Marysville, CA 95901**

**Personal Information for Public Safety Academy**

1. Course Title:  2. If applicable, Course Title:

**Student ID:**

*Please go to this link to create or update your Yuba College Student Account; a student account will need to be created before a student can enroll (two step process – CCCapply & Yuba College ID)*: <http://yc.yccd.edu/admissions/new-students>

|  |  |  |  |
| --- | --- | --- | --- |
| Name:  |       | Email:  |       |
| Home Address:  |       | Phone:  |       |
| City, State:  |       | Zip:  |       |

**Agency Affiliation \*(if applicable)\***

|  |  |  |  |
| --- | --- | --- | --- |
| Agency:  |       | Contact:  |       |
| Phone:  |       | Billing Address:  |       |
| Email:  |       | City, State:  |       |
| Zip:  |       |  |

**Check the boxes that apply. Please see course announcement for more details/clarification or follow links below.**

[ ]  Registration: **Non-Affiliated Student Only**: Once I register, I understand that I must pay all fees within **10 days** or risk being dropped from the course. I can pay fees with the business office at 530-741-6970 (Wendy Duck) or directly through my web advisor at: <https://webadvisor.yccd.edu/WebAdvisor/WebAdvisor?TYPE=M&PID=CORE-WBMAIN&TOKENIDX=6833081398>

[ ] Registration: **Affiliated/Sponsored Student Only**: Once I register, I understand that my agency will be invoiced and the due date will be pushed out to end of academy/semester, allowing time for process of invoicing and payments.

[ ]  Additional Fees: **All Students:** I understand that my duplication/materials will be included within my Yuba College registration fees; all other fees will be paid directly to the vendor of my choice (i.e., Follett Bookstore, Clothing Vendor, Medical Physician, etc.).

[ ]  Medical Clearance: **All Students:** I understand that I need to submit my medical clearance letter and the Health History, Par Q as part of my pre-requisites for clearance to enroll and be accepted for the academy training. (Affiliated Students: Agency Letter Only) – *See Course Announcement*

[ ]  DOJ Background: **832pc/Levels III, II**: I understand I must complete the DOJ clearance process and be cleared by the first date of my course; this process must be done within 90 days of the academy start date. (**Affiliated/Sponsored Student**: Agency Letter Only and included with the Medical Clearance Letter above)

[ ]  Parking Decal: **Non-Affiliated Student**: I understand that if I am driving a personal vehicle, I will need to purchase a $40.00 decal through my web advisor ($20.00 if BOGW approved). **Affiliated/Sponsored Student**: If I am an agency sponsored student commuting with others in one personal vehicle, I will need to contact the Public Safety Department as my agency will only be invoiced for one decal. Or, if I drive a company vehicle with exempt plates, I will not need to purchase a decal.

[ ]  I am an affiliated student and I will require a parking decal for my personal vehicle; please include the $40.00 fee to my account. **Vehicle Information:** Vehicle Make:  Vehicle Model: 

Color:  Year:  License Plate Number: 

[ ]  Personal History Statement: **All Students for Levels III / II / I**: I understand that I am to submit a clear and legible Personal History Statement for my student file. I further understand that any significant changes throughout my training will require necessary updates.

**Please fax, scan or mail this document, along with the medical clearance letters, to the Public Safety Office:**

* **Fax: 530-749-3874**
* **Email:** **cgil@yccd.edu** **/ Address: Attn: Corrine Gil, 2088 North Beale Road, Room 2101A, Marysville CA 95901**