



YUBA COLLEGE PUBLIC SAFETY CENTER
2088 N. Beale Rd., Marysville, CA 95901



Personal Information for Public Safety Academy

1. Course Title: Please Select One

2. If applicable, Course Title: Please Select One

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 or
- Email: kmcfarla@yccd.edu / Address: Attn: Kristyn McFarland 2088 North Beale Road, Room 2101A, Marysville, CA 95901