



# 26<sup>th</sup> JUDICIAL DISTRICT COURT COLLEGE APPLICATION

***PLEASE PRINT OR TYPE***



Full Name: \_\_\_\_\_ Date of Birth (MM/DD/YY): \_\_\_\_\_

Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Organization You Represent (if any) \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State of Issuance: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (for criminal records check)

Do you currently have any criminal or civil case(s) pending before the Court?  Yes  No

Have you ever been charged with a felony offense?  Yes  No

Have you been charged with a misdemeanor offense within the last two years?  Yes  No

Are you currently on parole or probation?  Yes  No

If yes to any of the above, please explain in detail:

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(Criminal records checks are conducted on each applicant. Any intentional misrepresentation will be grounds for immediate dismissal.)

Please list any medical conditions, allergies and/or medications you feel we may need to know about:

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Emergency Contact: \_\_\_\_\_  
Name Relationship

Phone Number(s): \_\_\_\_\_ ( h / w / c ) \_\_\_\_\_ ( h / w / c )

Have you participated in any other citizen's academy?  No  Yes

If yes, name of academy & year(s): \_\_\_\_\_

Court College is a 7-week program. Will you be able and willing to **attend no less than 6** of the 7 sessions?  Yes  No

**REQUIRED RESPONSE QUESTIONS**

Why would you like to participate in Court College?

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What is one thing you would like to change or understand better about our judicial system? Why?

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How will you use the information learned during Court College to help your community?

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**AGREEMENT**

By signing this application, I acknowledge that I have completed the above information completely and accurately. I acknowledge that I am at least 18 years old, a resident of Mecklenburg County or conduct business in Mecklenburg County, and do not have any pending criminal or civil case(s) in North Carolina. I am giving the Trial Court Administrator's Office permission to conduct a standard background check. The Trial Court Administrator's Office has total discretion regarding my participation in the 26<sup>th</sup> Judicial District Court College program.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Printed name of applicant

\_\_\_\_\_  
Date

**Submit application and \$25 program fee (check or money order, payable to *Justice Initiatives*) to:**

Trial Court Administrator's Office  
Attn: Court College  
832 East Fourth Street, Suite 4420  
Charlotte, NC 28202

Or

[Mecklenburg.COA@nccourts.org](mailto:Mecklenburg.COA@nccourts.org)

**ALL APPLICATIONS MUST BE RECEIVED BY  
FRIDAY, JANUARY 12, 2018**