

ONLY LAW ENFORCEMENT APPLICANTS MUST COMPLETE THE FOLLOWING:

Name:	Taylor Lozano	Gender:	Male
Social Security Number:	[REDACTED]		
AKA's:			
Date of Birth:	[REDACTED]	Place of Birth:	[REDACTED]
Nationality:	[REDACTED]		
Date of Colorado P.O.S.T. certification:	Have not taken it yet		

Last five (5) Addresses:

Street:	City/State:	Zip:
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]

I request and authorize the City of Cañon City Police Department to complete a criminal history, driver history and National Register check on background for employment with the City of Cañon City. I certify the above information to be true and correct.

Date: 03/20/2019

Signature: Taylor Lozano

Please mail or deliver completed application to:  
City of Cañon City  
Human Resources Department  
P.O. Box 1460/128 Main Street  
Cañon City, CO 81215-1460  
Fax 719-269-9017

May be filed online at:  
[http://www.cañonciti.org/departments/application\\_forms.html](http://www.cañonciti.org/departments/application_forms.html)

