

Application for the Norfolk Police Department

Citizen's Police Academy Session #32

Spring 2012

March 29, 2012 – June 21, 2012

Name: _____

Address: _____

City: _____

State: _____ **Phone:** _____

Zip Code: _____ **Email:** _____

Place of Employment: _____

Address: _____

Date of Birth: _____

Is your Driver's License currently Valid? _____

Have you ever been convicted of a Felony? _____

I certify that all statements made on this application are true. I further authorize the Norfolk Police Department to conduct a criminal history check based upon the information provided on this form.

Signed: _____ **Date:** _____

Mail application to:

**Norfolk Police Department Citizen's Academy
Attention: Officers M.L. Warren or M.O. Sarmiento
2500 N. Military Hwy
Norfolk, Va. 23502**

**Fax: 664-6911
Phone: 664-6900**