NEWPORT BEACH POLICE DEPARTMENT

CITIZENS' POLICE ACADEMY APPLICATION

870 SANTA BARBARA DRIVE – NEWPORT BEACH, CA 92660

PERSONAL INFORMATION

Name: _____ Home Phone: (_____)_____

Home Address: _____ Cell Phone: (_____)_____

City, State, Zip: _____ Email: _____

CA Driver's Lic. #: _____ Exp. Date: _____ SSN: _____-_____-_____

Choose your shirt preference:

Men's/Unisex Polo Shirt: ❑ Small ❑ Medium ❑ Large ❑ X-Large ❑ XX-Large

CURRENT EMPLOYMENT INFORMATION

(If Retired, list most recent Employment Information)

Occupation: _____ Business Phone: (_____)_____

Business Name: _____

Business Address: _____ City, State, Zip: _____

QUESTIONNAIRE

At the time of this application, are you under 21 years of age?	❑ Yes	❑ No
Have you ever been arrested or convicted of any criminal offense?	❑ Yes	❑ No
Do you have any medical conditions that limit your activities?	❑ Yes	❑ No
Have you ever used a name other than the one listed above?	❑ Yes	❑ No

If you answered "Yes" to any of the questions above, please explain:

_____

_____

_____

Please let us know why you are interested in attending the Citizens' Police Academy:

_____

_____

_____

Did someone refer you to our Academy? If so, who? _____

If not, how did you find out about this program? _____

Return completed applications by mail, in person at the Front Desk, or by email to hrangel@nbpd.org.

ELIGIBILITY FOR ATTENDANCE IS AT THE SOLE DISCRETION OF THE POLICE DEPARTMENT