



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 CitizensAcademy@nbpd.org.

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