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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Full Name: | | | | | | | | | | | | | | |
| Home Street Address: | | | | | | | | | | | | Apt/Suite: | | |
| City: | | | | State: | | | | | | | | Zip Code: | | |
| Home Phone: | | | | Cell Phone: | | | | | | | | Work Phone: | | |
| Email Address: | | | | | | | | | | | | | | |
| Henrico County Employee?  (Circle One) | | | | Yes No | | | | | | | If yes, which dept: | | | |
| Henrico County Resident?  (Circle One) | | | | Yes No | | | | | | | If yes, which District: | | | |
| How did you hear about the Henrico Citizens Fire Academy? | | | | | |  | | | | | | | | |
|  | | |  | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | |
| I\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Applicant’s Signature Here) | | | | Authorize Henrico Fire to conduct both a criminal history and DMV check as part of the application process for the Henrico Citizens Fire Academy. | | | | | | | | | | |
| ***(The following information is required and will be used for a criminal history/DMV check of all applicants.)*** | | | | | | | | | | | | | | |
| Date of Birth:  (DD,MM,YYYY) |  | | | | **Gender:** | | | | Social Security Number: | | | |  | |
| Driver’s License Number | |  | | | **Race:** | | | | State of Driver’s License | | | |  | |
| Driver’s License Exp: |  | | | | | |  | Is your license valid?  (Circle One) | | | | Yes No | | |
| Employer: | | | | | | | | | | | | | | |
| Employer Street Address: | | | | | | | | | | | | | | |
| City: | | | | State: | | | | | | | | Zip Code: | | |
| Have you ever been arrested and or convicted of a misdemeanor or felony? | | | | | | | | | | | | | | Yes No |
| Have you ever been arrested and or convicted of a misdemeanor traffic violation? | | | | | | | | | | | | | | Yes No |
| *If Yes, explain where and final disposition:* | | | | | | | | | |  | | | | |
|  | | | | | | | | | | | | | | |

***Please return completed application to:***

Henrico County Division of Fire, Citizens Fire Academy Coordinator

7721 E. Parham Road, PO Box 90775, Henrico, VA 23273-0775

Or Email completed application to: [FireCFA@co.henrico.va.us](mailto:FireCFA@co.henrico.va.us)