



**Henrico County Division of Police
Citizens Police Academy Application**
(All sections must be completed to be considered.)

Name: (Please check one: Mr. Mrs. Ms.)

Street Address:

PO Box:

City:

State:

Zip Code:

Home Phone:

Work Phone:

Cell Phone:

E-mail address:

Henrico County Resident? Yes No How did you hear about the Citizens Police Academy?

Why do you want to attend?

Police Academy Selection:

(Academies meet weekly for 11 weeks)

Citizens Academy - Spring
(March-May) 6:30-9:30 p.m.

Citizens Academy - Fall
(September-November) 6:30-9:30 p.m.

Citizens Academy: Ages 18+

Senior Citizens Academy: Ages 50+

Senior Citizens Academy - Spring
(March-May) 9AM-Noon

Senior Citizens Academy - Fall
(September-November) 9AM-Noon

I
(Signature Here)

Authorize Henrico Police to conduct both a criminal history and DMV check as part of the application process for the Citizens Academy.

(The following information is required and will be used for a criminal history/DM check of all applicants.)

Date of Birth:

Social Security Number:

Driver's License Number:

State of Driver's License Issue:

Driver's License Exp.:

Is your license valid? Yes No

Employer:

Employer Address:

City:

State:

Zip Code:

Have you ever been arrested and or convicted of a misdemeanor or felony? Yes No
(This also included misdemeanor traffic violations)

If yes, explain where and final disposition:

Please mail completed application to:
Henrico County Division of Police, Citizens Academy Coordinator
7721 E. Parham Road, PO Box 27032, Richmond, VA 23273-7032