



Citizen's Police Academy Registration Form

Name: _____ Date of Birth: _____
Present Mailing Address: _____ Email: _____
Phone #: Home: _____ Work: _____ Cell: _____
Driver's License Number: _____ State: ____
Current Employer: _____ Occupation/Title: _____
Employer Address: _____ Employer Phone #: _____
Emergency Contact Name: _____ Emergency Contact Phone: _____

Briefly Explain your reason for attending the Norwalk Citizen's Police Academy and what you would like to get out of attending:

Note: Criminal Background Checks may be completed due to sensitive police issues.

I hereby give the Norwalk Police Department permission to conduct a standard background check of my person, including a criminal history check and a local police records check. I also agree to make every effort to attend all sessions and abide by all program rules and requirements.

Signature: _____ Date: _____

If you have any questions please contact Officer Ben Lewiston or Officer Greg Hepperly

Email: blewiston@norwalk.iowa.gov ghepperly@norwalk.iowa.gov

515-981-0666 ext 2625 or ext 2636