

JACKSONVILLE BEACH POLICE DEPARTMENT

CITIZEN POLICE ACADEMY APPLICATION

DATE: _____

NAME: _____
First MI Last

STREET: _____ CITY: _____
 STATE: _____
 ZIP: _____

DATE OF BIRTH: / / SSN: XXX - -
Month Day Year

OCCUPATION: _____ *if retired previous occupation*

DRIVER'S LICENSE # _____ STATE _____

PHONE #: (____) _____ (____) _____ (____) _____
Home Business Cell

E-MAIL ADDRESS _____

SHIRT SIZE	S	M	L	XL	XXL
------------	---	---	---	----	-----

For Official Use Only:

Notes/Info

C.H/P.T.	
D.L.	
M.S.	
F.B.	
Linx	



Working with Citizens for a Safe Community

Session 44 begins January 9, 2020

***** Application deadline is January 9, 2020 *****

Applications may be delivered to: Sgt. Larry Smith Services Sergeant – 904-247-6193