

# Hawthorne Police Department

## Citizens' Academy

**MICHAEL HEFFNER**

**Chief of Police**

**Mail the completed application to:**

**Crime Free Multi-Housing**

**Hawthorne Police Department**

**12501 S. Hawthorne Blvd.**

**Hawthorne, CA 90250**

**(310) 349-2823 or (310) 349-2815**

### Hawthorne Police Department Citizens' Academy Application

Date:  Full Name:

Street Address

Home Phone:  Driver's License#  Date of Birth:

Hair Color:  Eye Color:  Weight:  Height:

Social Security#  Email:

Occupation:

Business:  Work Phone:

Reason for requesting to participate in the program:

*I understand the requirements to participate in the Hawthorne Police Department Citizens' Academy.  
I verify that I am not a convicted felon and have not had any misdemeanor arrests within the last year.  
By submitting this application I understand a background check may be completed to confirm this information.*

X \_\_\_\_\_  
**Signature**