



San Francisco State University Police Department

CITIZENS' POLICE ACADEMY APPLICATION

February 21 – May 09, 2018

NAME: _____ DAYTIME PHONE: _____

ADDRESS: _____ EVENING PHONE: _____

DATE OF BIRTH: _____ DRIVERS LICENSE NO: _____

EMPLOYER(if applicable): _____

ADDRESS: _____

Email address _____

OCCUPATION/MAJOR: _____

How did you hear about the Citizens' Police Academy?

Why do you want to attend the Academy?

Have you ever had contact with the police? Yes _____ No _____

If yes, please provide details:

Please return completed application to:

Sergeant Dave Rodriguez
San Francisco State University Police Department
1600 Holloway Avenue
San Francisco, CA 94132
Phone: (415) 338-3006
Email: daverod@sfsu.edu