

## City of Venice Police Department



Charlie Thorpe \* Chief of Police 1575 E. VENICE AVENUE, VENICE, FLORIDA 34292

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## 2025 CITIZENS POLICE ACADEMY APPLICATION

When: February 5 - April 9, 2025 (Wednesdays)

All 4 Sections must be completed. Please e-mail the completed form to Caroline Moriarty at: <a href="mailto:cmoriarty@venicefl.gov">cmoriarty@venicefl.gov</a>

Section 1 - Personal Information	
Name: (First/Middle/Last)	Date of Birth: (mm/dd/yyyy)
Preferred Name: (First)	
Address:	
City, State, Zip Code:	
Secondary Address:	
	ail:
Home Phone Number:	_ Work Phone Number:
Driver's License Number:	State:
Employer:	Occupation:
Employer's Address:	····
Have you ever been arrested for any offer	nse other than traffic? No Yes

If yes, where and when?
Please briefly list or describe civic activities or organizations you are involved with:
How did you learn about the Venice Police Department's Citizens Police Academy?
Why are you interested to attend the Citizens Police Academy?
Academy participants will receive a polo shirt at the first class. What is your shirt size? For example: Men's X-Large, Women's Medium
Section 2 - Emergency Contact Information During Your Attendance at the Academy
Name:
Relationship:
Address:
Telephone Numbers: Give us all of them! (Cell/Home/Work)
Section 3 - Authorization for Information
Occion o - Addion Zation for information
I certify that the information contained in this application is true and complete to the best of my knowledge. You are hereby authorized to make any necessary investigation of my personal history for consideration to attend the Venice Police Department's Citizens Police Academy.
Signature:
Date:

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Section 4 – Attach a copy of your current Driver's License