

BENTONVILLE

POLICE



CITIZEN'S POLICE ACADEMY APPLICATION

Name: (Last) _____ (First) _____ (MI) _____

Address: _____ City: _____ State: __ Zip: _____

Phone: (Work) _____ (Home) _____ (Emergency) _____

Date of Birth: (MM/DD/YYYY) ____/____/____ DL#: _____

Occupation: _____ Place of Employment: _____

Email address: _____

Why do you wish to attend the Citizen's Police Academy?

Give the name, address, and phone number of two character references:

1. _____
2. _____

Applicants are required to be at least 18 years of age and have no criminal record, (no felony convictions and/or arrests for Domestic Abuse Laws). Please return this application to the Bentonville Police Department in person, via fax at 479-271-3187, email, or mail to the following address:

Bentonville Police Department
Attn: Melissa Fox (Public Information Officer)
908 SE 14th Street
Bentonville, AR 72712

Any questions about participating in or general questions about the Citizen's Police Academy prior to submitting the application, please contact Melissa Fox at 479-721-4487 or via email at melissa.fox@bentonville.arkansas.gov .