



**LAKWOOD POLICE DEPARTMENT
CITIZEN POLICE ACADEMY
Application & Information Sheet**



Date: _____

Name: _____ Date of Birth: _____

Home Address: _____

Home Phone: _____

Work Address: _____

Work Phone: _____ Occupation: _____

Describe your interest in the Citizen Police Academy: _____

Short Biography: _____

IF NOMINATED BY SOMEONE, COMPLETE SECTION BELOW (not required):

Nominated By: _____ CPA Graduate? _____

Reason For Nomination: _____

Please return to: Lakewood Police Department
ATTN: Citizen Police Academy
445 S. Allison Parkway
Lakewood, CO 80226