



PITT COUNTY **SHERIFF**

**Sheriff
Paula
Dance**

CITIZENS ACADEMY APPLICATION FORM

FULL LEGAL NAME: _____

NAME I PREFER: _____ RESIDENT OF PITT COUNTY? _____

STREET ADDRESS: _____ CITY: _____

STATE: _____ ZIP CODE: _____ 18 OR OLDER?: _____

EMPLOYER: _____ JOB: _____

EMAIL ADDRESS: _____ CELL PHONE: _____

HOW DID YOU HEAR ABOUT OUR ACADEMY?: _____

WHY DO YOU WANT TO ATTEND?: _____

LIST ANY COMMUNITY GROUP AFFILIATIONS: _____

HAVE YOU EVER BEEN CHARGED WITH OR CONVICTED OF ANY CRIME? _____

IF YES, PLEASE EXPLAIN: _____

SIGNATURE _____ DATE: _____

***WHEN COMPLETE, DELIVER APPLICATION & BACKGROUND CONSENT FORM TO OUR OFFICE LOCATED AT 100 NEW HOPE RD. IN GREENVILLE OR EMAIL IT TO MS. VENUS CURRY AT VENUS.CURRY@PITTCOUNTYNC.GOV. YOU CAN EMAIL WITH QUESTIONS OR CALL HER AT (252) 902-2776. THANK YOU!**

**Mailing Address:
Post Office Box 528
Greenville, N.C. 27858**



**Office: (252) 902-2800
www.PittCountySheriff.com**



**Street Address:
100 New Hope Rd.
Greenville, N.C. 27834**