

Santa Rosa County Sheriff's Office
Citizen's Law Enforcement Academy
Application



Date of Application: _____

Name: _____ DOB: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Driver's License Number: _____ State: _____

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

Have you ever been convicted of a crime? Yes _____ No _____

If yes, please explain: _____



Please return application to:

Cindy Sarver
Community Relations
P.O. Box 7129
Milton, FL 32571
(850) 983-1236