



CHAPLAIN'S ACADEMY Application

Please Read Carefully Before Proceeding

Please type or print legibly. All applications that are incomplete and/or unsigned will not be accepted. There is no charge for admission into the Richmond Chaplain's Police Academy. Completed applications should be mailed, emailed or faxed to:

Richmond Police Department
CYIS Division, Room 431B
Attn: Police Chaplains Academy
200 West Grace Street
Richmond, VA 23220
Email: RPDCares@richmondgov.com
Fax (804) 646-4299

Date: _____

Age: _____

Personal Information

Name: _____	Sex: _____	Race: _____
Complete Home Address: _____ _____		
Mobile Telephone: _____		
E-mail Address: _____		
Twitter, if applicable: _____ _____		
Are you licensed/ordained minister? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please list name of your worship site: _____		
Please list your role and responsibility: _____ _____		
Have previously served as a Chaplain? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please list agencies/organizations: _____ _____ _____		

Emergency Contact Name: _____
Telephone: _____ _____ _____

Background

Please explain briefly why you wish to attend the Chaplain's Academy: _____

[illegible]

Please list any associations, clubs, or organizations you are affiliated with:

Please review your answers carefully and read the statement below before signing this application.

I hereby certify that there are no willful misrepresentations, omissions or falsifications in the foregoing statements and answers to questions. I understand that any misrepresentations, omissions or false statements on this application shall be sufficient cause for rejection for enrollment or dismissal from the City of Richmond Chaplain's Academy.

Applicant's Signature

Date _____

