



## OPENING THE LINES OF COMMUNICATION With YOUR Police and Fire Department

# Citizen Public Safety Academy

- WHEN?** June 1, 2017 – August 10, 2017  
Thursday evenings, 6:00 p.m. - 9:00 p.m.
- WHERE?** Riverdale Government Annex, 6690 Church Street,  
Riverdale, GA 30274
- WHY?** The purpose of the Citizen Public Safety Academy is to foster better communication between citizens and the public safety departments through education and citizen feedback.
- WHO?**
1. City of Riverdale: Members of the Community
  2. 18 years of age and older
  3. Must clear a background check
- HOW?** Complete the enrollment application and return to:  
Officer N. Lewis, Community Affairs  
City of Riverdale Police Department  
6690 Church Street, Riverdale, GA 30274  
Or Email: [nlewis@riverdalega.gov](mailto:nlewis@riverdalega.gov)  
Or Fax: (770) 996-1913
- WHAT?** Classes will be taught by Riverdale's Finest: certified police officers, fire fighters, supervisors, civilian instructors, and command officials.  
Examples of topics include:
- ❖ Crime Prevention & Interaction expectations with Police
  - ❖ Public Safety Procedures & 911
  - ❖ Fire Prevention/Safety & Extrication
- COST?** FREE
- MORE?** Contact Officer N. Lewis at [nlewis@riverdalega.gov](mailto:nlewis@riverdalega.gov) or  
(404) 759-9140, **APPLICATIONS DUE BY MAY 26, 2017.**



**Riverdale Public Safety Department  
Citizen Public Safety Academy**

**APPLICATION FOR ENROLLMENT**

PLEASE PRINT

**Full Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City/Zip:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Race:** \_\_\_\_\_ **Male** \_\_\_ **Female** \_\_\_

**Driver's License #:** \_\_\_\_\_ **State** \_\_\_\_\_

**Home Phone #:** \_\_\_\_\_ **Cell Phone #:** \_\_\_\_\_

**Place of Employment:** \_\_\_\_\_

**Occupation/Position:** \_\_\_\_\_ **Work #:** \_\_\_\_\_

**Community Group Affiliation (if any):** \_\_\_\_\_

**Why do you wish to attend the Citizen Public Safety Academy?**

\_\_\_\_\_  
\_\_\_\_\_

**How did you hear about the Citizen Public Safety Academy?**

\_\_\_\_\_  
\_\_\_\_\_

**Have you ever been convicted of a felony? Yes** \_\_\_\_\_ **No** \_\_\_\_\_

*I hereby authorize the Riverdale Police Department to make an examination of my criminal history records and driving records, for the purpose of evaluating my eligibility for the Citizen Public Safety Academy. I fully understand that incorrect, misleading, or incomplete information may be cause for rejection of my application.*

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Please return completed form by MAY. 26:**

Officer N. Lewis  
Riverdale Police Department  
6690 Church Street  
Riverdale, GA 30274  
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Fax: (770) 996-1913