CITIZEN'S POLICE ACADEMY

City of Springfield, Massachusetts

APPLICATION FOR ADMISSION

Name: _____

Address: _____**Zip Code:** _____

Date of Birth: _____ **License or I.D. #**: _____

Phone Number (day): _____

Phone Number (evening): _____

E-mail_____
Are you a member of a Beat Management Team? _____
Are you a member of a Neighborhood Council /Civic Association? _____
Are you a member of a Crime Watch? _____
List any other organizations you belong to, if any._____

How did you hear about this class? _____

The next academy starts on **Thursday, October 1st, 2026 at 6:00PM** at The Paul J. Fenton Public Safety Annex, 50 East Street.
There is no charge and the class is open to all **Springfield residents** 18 years and older.
The academy will meet on Thursday evenings from 6:00pm until 9:00pm.
The Academy will run for 9 weeks. Your attendance is welcome.
Send in this application today.

I am submitting my name for consideration for admission to the Citizen's Police Academy. I understand that a record check will be conducted. I understand this is an educational opportunity.

Print name please: _____

Signature: _____*Date*: _____

For more information, please call 735-1566. Mail this completed form to:
Officer Kevin Ashworth
Paul J. Fenton Safety Annex
50 East Street
Attention: Training Division
Springfield, MA 01104
or Fax to (413) 787-6319

kashworth@springfieldpolice.net