



Sheriff Michael L. Chapman

# LOUDOUN COUNTY SHERIFF'S OFFICE

880 Harrison Street SE, Leesburg, Virginia 20175  
Telephone 703-777-0407

## CITIZENS' POLICE ACADEMY APPLICATION

The Citizens' Police Academy is designed to give citizens an overview of the Loudoun County Sheriff's Office. Graduates of this course will have a better understanding of the operation of the Sheriff's Office, and a greater awareness and appreciation of the daily challenges faced by the Loudoun County Sheriff's Office.

The Citizens' Police Academy is an 11-week program that meets one evening each week (Thursday) and consists of classroom and hands-on instructions.

Topics covered during the academy will include virtually every aspect of police work. In addition, participants will be given opportunity to become familiar with a variety of police equipment.

The Citizens' Police Academy is open to all individuals who live in Loudoun County. Due to the popularity of this class, we ask that participants attend at least six (6) of the eleven (11) weeks.

Should you have any questions, please contact Emir Bekric by phone at 703-737-8238 or email [Emir.Bekric@loudoun.gov](mailto:Emir.Bekric@loudoun.gov)

AFTER COMPLETING THE APPLICATION AND BACKGROUND CHECK FORM YOU CAN:

**MAIL THE PAPERWORK TO:**  
**LOUDOUN COUNTY SHERIFF'S OFFICE**  
**803 SYCOLIN ROAD**  
**LEESBURG, VA 20175**  
**ATTN: CPA-ADMIN/TECH DIVISION**

**OR E-MAIL THE FORM TO:**  
**EMIR.BEKRIC@LOUDOUN.GOV**  
**FAX: 571-258-3534**

**After the academy graduation all forms provided as part of the application will be safely disposed.**

**Contact Information:**

Full Name	
Home Address	
City, ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

**Do you live in Loudoun County:    YES        NO****My Sheriff/Police District Station is (check one):**

- |  |  |
|--|--|
| <input type="checkbox"/> Eastern Loudoun Station | <input type="checkbox"/> Town of Leesburg Police     |
| <input type="checkbox"/> Dulles South Station    | <input type="checkbox"/> Town of Purcellville Police |
| <input type="checkbox"/> University Station      | <input type="checkbox"/> Town of Middleburg Police   |
| <input type="checkbox"/> Western Loudoun Station | <input type="checkbox"/> Other                       |

**Previous Volunteer Experience (optional):**

Summarize your previous volunteer experience.

**Person to Notify in Case of Emergency**

Full Name	Home Phone
Home Address	Work Phone
City, Zip Code	E-Mail Address

**Agreement and Signature**

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a Citizens Police Academy participant, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

**Thank you for completing this application form.**



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This is to certify that I am an applicant of the Citizens Police Academy, and that I do hereby authorize the Loudoun County Sheriff's Office to request a criminal history check. The results will not be made public, and will be destroyed after a complete review.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Full Name: \_\_\_\_\_  
(PRINT NAME)

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

**FAX TO: (571)-258-3534**

**EMAIL: [Emir.Bekric@loudoun.gov](mailto:Emir.Bekric@loudoun.gov)**

**Attn: Emir Bekric**

For Office Use Only

VCIN

NCIC

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LCSO Records