

MARTA POLICE DEPARTMENT

CITIZENS IN TRANSIT VOLUNTEER APPLICATION



Name: _____ Date: _____

Address: _____

City/Zip: _____ Date of Birth: _____

Sex: Male Female Race: _____ T-Shirt Size: _____

Occupation: _____ Employer: _____

E-mail Address: _____

Home Phone: _____ Cell Phone: _____

Notification in Case of Emergency: Name _____

Address _____

Telephone _____

Hobbies and Skills: _____

Hours/Days Available: _____

List two references:

1. _____ Phone Number: _____

2. _____ Phone Number: _____

Signature: _____ Date: _____

Please mail or fax completed form to:

Officer Natalie Johnson, Coordinator
Citizen's Police Academy
2424 Piedmont Road NE
Atlanta, GA 30324

Questions call 404-848-3670
Fax application to: 404 848-5005
E-mail: nhjohnson@itsmarta.com

