



## COMMUNITY POLICE REVIEW COMMISSION APPLICATION

DATE: \_\_\_\_\_

Check One: **New Appointment**

**Re-Appointment**

YOUR NAME & EMAIL: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

HOW LONG HAVE YOU BEEN A RESIDENT OF THE CITY OF RICHMOND? \_\_\_\_\_

REASONS FOR INTEREST IN APPOINTMENT: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

FRATERNAL AND/OR CIVIC ORGANIZATIONS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

EDUCATION: \_\_\_\_\_

\_\_\_\_\_

REFERENCES (Minimum 5 - List Name, Address, Phone Number & Email Address)

1) \_\_\_\_\_

\_\_\_\_\_

2) \_\_\_\_\_

\_\_\_\_\_

3) \_\_\_\_\_

\_\_\_\_\_

4) \_\_\_\_\_

\_\_\_\_\_

5) \_\_\_\_\_

\_\_\_\_\_

**NOTE:** All Community Police Review Commissioners are required to complete an eight (8) hour Police Department orientation and a minimum of twenty (20) hours participation in the Ride Along program. Please call (510) 307-8032 for additional information regarding these requirements.

Applicant's Signature: \_\_\_\_\_

DELIVER OR MAIL TO:

\_\_\_\_\_

CITY CLERK'S OFFICE  
450 Civic Center Plaza  
Richmond, CA 94804  
Phone: (510) 620-6513

OR EMAIL TO: [CityClerkDept@ci.richmond.ca.us](mailto:CityClerkDept@ci.richmond.ca.us)