

Code Enforcement Academy

Website • www.atlantaga.gov/CodeAcademy

Telephone • 404-546-4982

Email • CodeAcademy@atlantaga.gov

Applicant Information								
Full Name:					Date:			
	Last	First			M.I.			
Address:								
	Street Address				Apartme	nt/Unit #		
	_							
	City				State ZIP Cod	State ZIP Code		
Phone:				Email				
Council Dist	rict:NPU:			Nei	ghborhood:			
Do you regularly attend NPU meetings?		YES	NO		Previously applied for Academy?	YES	NO	
					Were you involved in the former Neighborhood Deputies Program? If yes, what was your role?	YES	NO	
Do you regularly attend Neighborhood Association meetings?		YES	NO		m yes, what was your role:			
Do you have any previous Code Enforcement experience or background? (not required)		YES	NO					
Can you attend a 5-week course every other Saturday from 9 am to 12 pm?		YES	NO					
How do you plan to use info from the Code Enforcement Academy?								
		Discla	imer	and Sig	gnature			
I understand that space is limited to City of Atlanta residents and applicants will be accepted on a first come basis. After capacity is reached, applicants will be considered for future courses. Applicants will be contacted using the info provided on this application.								
Signature:					Date:			