



California Police Chiefs Association Associate Member Application

Name _____ Rank _____
 Agency _____
 Address _____
 City _____ State _____ Zip _____
 Direct Line _____ Department Phone _____
 E-mail _____ Cell Phone _____

Secretary/Assistant's Name (If applicable) _____
 Assistant's Phone _____ Assistant's e-mail _____

Name and Signature of Police Chief Nominating You for Membership

Name: _____ Signature: _____

Associate Membership Fees are \$145 per member/year

_____ My check, made payable to CPCA, is enclosed _____ Please charge my credit card

Card Number _____ CVV Code _____ Exp. _____

Signature _____

Please respond to the questions below so that we may process your membership in Cal Chiefs:

Are you a full-time, paid, sworn officer with full peace officer powers as specified in Section 832 of the Penal Code? Yes No

Gender: Male Female

Ethnicity:

- American Indian/Alaska Native
- Asian
- Black/African American
- Caucasian
- Hispanic/Latino(a) Spanish
- Middle Eastern/North African
- Native Hawaiian/Pacific Islander
- Decline to State

Languages Spoken (other than English) _____

Have you attended the Role of the Chief Course? Yes No

Date sworn as peace officer in current agency _____

Year of Birth _____ Age when you started in law enforcement _____

Please indicate your highest level of education:

AA BA/BS MA/MS PhD JD Other (please specify) _____

Have you served in the military, either active or reserve? Yes No

Anticipated year of retirement from law enforcement? _____