**PRE-REGISTRATION**

for

**Written Examination**

Please print clearly

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Yes, I plan to attend the Applicant Written Examination

to be held on Saturday, May 15, 2021,

at New Albany Police Sub-station

1721 Ekin Avenue, New Albany, IN 47150.

I understand photo identification is required for entry to the test.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please email back no later than May 1, 2021**

**to: napmc@cityofnewalbany.com**