



Office of the Sheriff

Hoke County Sheriff's Office
Roderick C. Virgil, Sheriff

429 East Central Avenue
Raeford, NC 28376

PO Box 300
Raeford, NC 28376

Phone (910) 875-5111
Fax (910) 875-2034



The Hoke County Sheriff's Office Citizen's Academy is an 9-week, 18-hour educational program that provides information about the daily operations of the Sheriff's Office. It is an opportunity for the Hoke County Sheriff's Office and citizens to interact and allow citizens to learn more about the Sheriff's Office in their community.

The Academy Sessions are held on Tuesday evenings, 6 p.m. to 8 p.m. in the Fall and Spring of each year.

Our next Citizens Academy will take place in the Fall of 2023; dates are set for Tuesday, 10-10-23 to Tuesday, 12-12-23. (we will take a week off for Halloween on 10-31-23) Applications will be accepted at any time for the Fall 2023 class.

There is no fee for the course. Participants will learn about the following topics:

- Patrol Tactics
- Traffic Stops
- K-9 Unit
- Crime Scene Investigation
- Specialized Weapons
- Fingerprinting and Photographs
- Narcotics
- Search & Rescue
- Sex Offenders
- Gang Investigations
- School Safety
- On-Line Scams
- Domestic Violence
- Training Requirements

Nationally Accredited Agency

Applicants must be 18 years of age, pass a criminal history check and have no felony arrests. Preference is given to Hoke County residents or business owners.

Applications can be mailed or dropped off at:

Hoke County Sheriff's Office
429 E. Central Ave.
Raeford, NC 28376

If accepted, applicants will be notified in writing two weeks prior to the start of the academy. Class size is limited to 20 participants.

Completion of this program **DOES NOT** certify a citizen as a sheriff deputy or a reserve deputy.

For additional information contact the Community Outreach Liaison at 910-878-1222 or jlewis@hokesherriff.org.



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APPLICATION SHERIFF'S CITIZEN ACADEMY

PLEASE PRINT

Name (last, first, middle initial) : _____

Address: _____

City, State and Zip Code: _____

Best Contact Phone number: (____) _____

Email address: _____ @ _____

Date of Birth: _____ Social Sec Number: _____

Occupation: _____

Employer Address: _____

The facts set forth in my application are true and complete. The applicant hereby authorizes the Hoke County Sheriff's Office to make any investigation of my personal history deemed necessary for consideration to enter the Hoke Co Sheriff's Office Citizen's Academy.

Signature of Applicant: _____

Status of Application: Approved by: _____ Date: _____

Denied by: _____ Date: _____

Letter sent notifying applicant by: _____ Date: _____

Nationally Accredited Agency