

Portsmouth Neighborhood Academy

APPLICATION

Name: _____

Home Address: _____

Telephone: Day _____ Evening: _____

Name of your neighborhood: _____

Please list any community, civic, or faith-based involvement.

Return to:

Portsmouth Neighborhood Academy
City Manager's Office
Attn: Bernadette L. Hogge
801 Crawford Street
Portsmouth, Virginia 23704

or fax to:
(757) 393-5241