Elizabethtown Police Department Teen Citizens Police Academy

Application

Name_		
First	MI	Last
Current Address		
Home Phone	Cell Phone	
Email	Date of Birth	
School Name & Grade		
Emergency Contact	Phone Number	
Teen Citize	ens Police Academy Ro	equirements
case-by-case basis with parer Applicants must not have be criminal or civil actions pend Applicants and parent/guar Department to check for crim Applicants must agree to m	ntal approval). een convicted of a felcling against them. rdian must sign allo ninal history. hake every effort to at they will not be able n from the course.	reptions will be considered on a cony crime and must not have any owing the Elizabethtown Police tend all classes and give advance to attend a class. One unexcused a 18 years of age.
	authorize the Elizabe	town Police Department's Teen thtown Police Department to do
Applicant's Signature		Date
Parent/Guardian Signature		Date

Fax To: E-town PD (270) 769-1144 Email To: john.thoma s@ elizabethto wnky.gov