



Junior Police Academy Application Form

A. Applicant information

Have you participated before?	Preferred class:	Spring	July	August
Yes No				

Applicant's full name	Date of birth	Age	Gender
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Allergies or medical conditions

B. Parent / guardian information

Parent / guardian full name

Address	City	Province	Postal code
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Home phone	Work phone	Cellphone	Email address
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C. Applicant's essay: Why do you want to participate? 250 word maximum.

Personal information on this form is being collected under the authority of the Freedom of Information and Protection of Privacy Act, s. 33(c). It will be used to determine eligibility and suitability for the Junior Police Academy and to administer participation in that program, if accepted. Questions about the use or collection of this information should be directed to the Sergeant, Youth Mentorship, Community and Youth Services Section, Calgary Police Service, 403-428-5836.

Parent / guardian signature	Date
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Submit your completed form through one of the following methods:

Email: youthmentorship@calgarypolice.ca

Mail: Calgary Police Service, 5111 47 Street N.E., Calgary, AB, T3J 3R2

Fax: 403-428-8393