

CITY OF HUNTINGTON PARK POLICE

TEEN ACADEMY



APPLICATION

6542 MILES AVENUE, HUNTINGTON PARK, CA 90255

PHONE (323) 826-6665 · FAX (323) 584-1137

WWW.HUNTINGTONPARK.ORG



6542 MILES AVE. HUNTINGTON PARK, CA 90255
 (323) 826-6665 HPPOLICE.ORG

“Dedicated to Service”

TEEN APPLICANT

Last Name			First Name			Middle Name		
Sex	Height	Weight	Hair	Eyes	Date of Birth	Driver's License Number (If Applicable)		
Home Address			Apt/Unit	City	State	Zip Code	Phone Number ()	
Work/School Address			Grade	City	State	Zip Code	Phone Number ()	
Father or Legal Guardian's Name (Last, First)		Home Address				Phone Number ()		
		Work Address				Phone Number ()		
Mother or Legal Guardian's Name (Last, First)		Home Address				Phone Number ()		
		Work Address				Phone Number ()		
Vehicle Year/Make	Model	Color	License Plate Number	Insurance Information				

REFERENCES

Please list two adult references who can comment on your suitability for our program. References can be teachers, counselors, employers, clergy, etc. Please do not use relatives.

Name (Last, First)	Address	Phone Number ()	Title/Position
Name (Last, First)	Address	Phone Number ()	Title/Position

EMERGENCY INFORMATION

In case of an emergency, please provide an emergency contact other than the parent or guardian(s) listed above.

Name (Last, First)	Relationship	Address	Phone Number ()
Physician's Name		Address	Phone Number ()
Medical Concerns (Allergies, Medications, Special Needs etc.)			

POLICE DEPARTMENT USE ONLY

App ok rejected

Date Received	Date Reviewed
By:	

AUTHORIZED RELEASE

I, _____, understand that any portion of this application is subject to examination by the City of Huntington Park Police Department, and/or the staff of Huntington Park Police Department. I acknowledge that all of the information contained herein will be used solely for the Teen Police Academy, and for no other purpose. I hereby attest that all of the information contained herein is, to the best of my knowledge, true and correct.

Applicant's Signature

Parent/Guardian's Signature

ACKNOWLEDGEMENT

I hereby acknowledge that if I am selected as a member of Huntington Park Teen Police Academy, my primary objective will be to study the field of Law Enforcement and its possibilities for career opportunities. I acknowledge that teamwork is a necessary ingredient for the success of the program. My conduct will remain exemplary to others, both in and out of the Police Academy.

Applicant's Signature



Parent/Guardian's Signature