

Falls Township Police Department

188 Lincoln Highway · Fairless Hills · PA · 19030 Phone: (215) 949-9100 · Fax: (215) 949-9106 fallsrecords@fallstwppd.com

Youth Police Academy Application

Please be advised, the Youth Police Academy is a highly publicized event. For further details, please see the Photo/Video Consent form.

Shirt Size (Circle Size): S M L XL Gym Short Size (Circle Size): S M L XL Returning Cadet: ☐ Yes ☐ No

	Applicar	nt Information				
Full Name	e: Last	First	M.I.	DOB:] Female	
Address:				Apartment/Uni		
	Su eet Auuress			Apar intent/ oni	ι π	
	City		State	ZIP Code		
Phone: _		Email				
Place of Employm Address:	ent:					
Parent/G	uardian Name(s):		Phone:			
ICE (In Ca						
	Ed	lucation				
Current School:			Gra	ade:		
From:	To:	Did you graduate? YES	S □ NO □	Current GPA:_		
Next Year's School: Grade:						
	Poli	ce Contact				
Have you ever been arrested, convicted, or charged with any offense other than minor traffic offenses? YES NO If yes, please explain in detail what actions were taken against you:						
	ever had any police contact? ase explain:			YES	NO	

C	haracter References
${\it Please \ list \ three \ adult \ character \ references \ that \ a}$	re not related to you.
Full Name:	Relationship:
Address:	nl
Full Name:	Relationship:
Address:	Dlama
Full Name:	ndar, de
Address:	Dl
	Essay
	ut the Youth Police Academy and why you wish to attend. Please submit
your essay with this application. Should you need i	more space, please attach your remaining essay to this paper.
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	claimer and Signature
I certify that my answers are true and complete to	o the best of my knowledge.
	igation inclusive of criminal history, police contacts, school discipline, ownship Police Department reserves the right to determine an
Applicant	
Signature:	Date:
Parent/Guardian	
Signature:	Date: