

HARKER HEIGHTS POLICE DEPARTMENT

Youth Police Academy Application

Student's Name:		
Date of Birth://	Address:	
Phone:	Male / Female	
What school do you attend _		
Hobbies/Interests		
Have you ever been in troub	le with the Police or Juvenile Authorities? YES or	NO
Shirt size:		
Parent(s) / Guardian(s):		_
Cell Phone(s):	Work Phone:	
Emergency Contact:		
Relationship:	Phone #:	

In the space provided below, in your own words, explain why you would like to attend the Youth Police Academy?
I authorize The City of Harker Heights and The Harker Heights Police Department to publish photos of my child on social media and/or The City of Harker Heights website.
I <i>do not</i> authorize The City of Harker Heights and The Harker Heights Police Department to publish photos of my child on social media and/or The City of Harker Heights website.
I hereby certify that there are no willful misrepresentations, omissions, or falsifications in this application and that all answers are true and correct to the best of my knowledge.
Student Signature:
Parent Signature:
Date:/

Please return completed application to the Community Services Division, or to the front desk of the Harker Heights Police Department.