

Canton Public Safety Department's



Youth Academy
2019 Application

Session Dates: June 24-28, 2019



Please print answers to all questions.

First Name _____ Last Name _____

Address _____

City _____ State _____ Zip _____

Home Phone # _____ Cell Phone # _____

Birthdate ____/____/____ MI Drivers License # _____

Email Address _____ Current School _____

T-Shirt Size (Circle One - Adult Sizes) : S M L XL XXL XXXL

List any awards or honors you have received: _____

List any/all school-related disciplinary actions, including academic probation, expulsion, etc. _____

(Application continues on page 2)

Youth Public Safety Academy Application

Page 2

Why do you want to attend Canton Public Safety's Youth Academy? _____

Have you previously applied to the Youth Academy? Yes _____ No _____

SIGNATURE OF APPLICANT _____

PARENT (LEGAL GUARDIAN) INFORMATION BELOW IS REQUIRED FOR APPLICATION TO BE CONSIDERED.

PARENT (LEGAL GUARDIAN) INFORMATION

First Name _____ Last Name _____

Address _____

Home Phone # _____ Cell Phone # _____

Drivers License # _____

PARENT (LEGAL GUARDIAN) APPLICATION APPROVAL

As the parent/legal guardian of this minor applicant, I understand that portions of this academy may include hands-on demonstrations and a daily physical fitness activity. I further understand applicants must be Canton residents, between the ages of 13-17 (as of June 24, 2019), and they will be subject to a criminal background check prior to acceptance into the program. I further understand class size is limited and qualifying applicants will be selected at random with status notifications being sent in writing during the month of May, 2019.

By signing, I as parent/legal guardian of the minor applicant approve and accept the content and conditions on this application.

SIGNATURE OF PARENT/LEGAL GUARDIAN _____

**Return this application by mail or in person April 30, 2019
to the Canton Police Department, 1150 S. Canton Center Road, Canton, MI 48188**