

Class will meet Mon-Fri starting June 16th-26th. Class is from 9am-3pm

GENERAL INFORMATION					
NAME:					
ADDRESS:					
SCHOOL 2024/25:					
GRADE 2024/25:					
GENDER					
D.O.B.					
T-SHIRT SIZE:		YOUTH	or	ADULT	(circle one)
SHORTS SIZE:		YOUTH	or	ADULT	(circle one)
PARENT EMAIL:					
EMERGENCY CONTACT INFORMATION					
NAME:					
PHONE #:		RELATIONSHIP:			
NAME:					
PHONE #:		RELATIONSHIP:			
MEDICAL INFORM	ATION	·			
MEDICAL LIMITATIONS OR KNOWN ALLERGIES:					
				Applica	ation Due May 1st 2025
Guardian Signature			Date		
Submit to S.R.O. Wilson no later than May 1st 2025 Chesterfield Police Department, 46525 Continental Dr, Chesterfield, MI 48047					

or via email at <u>rwilson@chesterfieldpolice.org</u>

Any questions can be directed to SRO Ryan Wilson at (586) 949-4346

Be sure to include:

- Junior Public Safety Academy application
- Letter of recommendation signed and sealed by a teacher
 Letter of interest from participant, containing one paragraph explaining why he/she wants to attend and why he/she should be selected.