

Northeast Regional Law Enforcement Educational Association (NERLEEA)

CADET POLICE ACADEMY

ADULT LEADER APPLICATION

UNIVERSITY OF HARTFORD - WEST HARTFORD, CT



Name:	D.O.B			_
Send Mail to: [] HOME	ADDRESS[]DEPARTM	MENT ADDRESS		
Address:		City:	State	e: Zip:
Phone:	Sex:			
Cell number to be used	to contact you while at	the academy:		
E-Mail Address:	Police Department:			
Chief of Police:		Dept. Addres	ss:	
City:	State:	Zip:	Dept. Telephone	o:
Sworn Officer?	RANK			
DUTIES:		If <u>N</u>	OT a police officer, I	ist your occupation/duties:
			Have you ever a	attended any other youth
academy?	_ If YES, How Many year	rs?, Where	If YES,	List previous assignments:
	,			
Do you hold any special o	certifications or training:_			
Have you ever been arre	sted?: If \	YES, did it result in co	onviction?	:
f yes, please explain: WHAT AREA WOULD YOU L	IKE TO BE ASSIGNED TO AT	THE 2013 ACADEMY?		
	ULT LEADERS TO PARTICIPA			
[] Firing Range Instructor (Help NEEDED)] Cafeteria Monitor]] Dorm Monitor / Hall Monitor
[] Drill Instructor (All Programs)] Event Monitor	[] Role Player (Mock PD)
[] Office Staff] Practical Skills Prog	ram [] OTHER

THIS FORM IS FOR INFORMATION COLLECTION PURPOSES ONLY!

[] Activities (Assist where needed) [] OTHER _____

In order to register for the Academy, a signed agreement and printed online registration must be submitted with ALL forms EXCEPT for medical forms which must be brought with the attendee on the morning of the academy.