



**DuPont Police Department**  
1780 Civic Drive, Suite 100  
DuPont, WA 98327  
Office 253-964-7060 Fax 253-964-8491

2025 Youth Academy Date: August 19-20

Application Date: \_\_\_\_\_

## 2025 YOUTH ACADEMY APPLICATION

Please print legibly and complete the ENTIRE application.

Last Name:	First Name:	Middle Name:
Street Address:		
City:	State:	Zip Code:
Telephone #:	Date of Birth:	
Email Address:		

### Emergency Contact Information

Name:	Relationship:	
Street Address:		
City:	State:	Zip Code:
Telephone #:	Alternate #:	

To attend the DuPont Police Department's (DPD) Youth Academy, each applicant will need to turn in this signed application and the attached waiver. If you have any questions regarding these forms or about the academy class, please contact the DuPont Police Department at 253-964-7060 or via email at [police@dupontwa.gov](mailto:police@dupontwa.gov). All academy attendees must be between the ages of 11-14 and attend school in the City of DuPont.

***"While we will try to accommodate every application, please be aware that not every application may be accepted. The DuPont Police Department reserves the right to deny any application into this voluntary program for any reason. This reason may include, but is not limited to: cost and manageability of class size, availability of Department staff to facilitate the program, logistics, law enforcement operational demands, or any other reasons. The Department is not under any obligation to disclose the reason why an application may be accepted or denied."***

Applicant Signature:	Date:
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### FOR INTERNAL USE ONLY

Internal Notes:		
Date Rec'd:	Background Conducted By:	Date Conducted:
Letter Sent to Applicant: Yes / No	Stand-by Letter Sent to Applicant Yes / No	Notes:

