ORANGE COUNTY SHERIFF'S DEPARTMENT

TEEN ACADEMY 2024 APPLICATION



Please email completed application to teenacademy@ocsheriff.gov.

(City of Tustin)

Full name of student:		
Date of Birth:	Age: Shirt Size: Adult S / M / L / XL	
Address:		
Mobile phone number:		
Email address:		
Have you ever been taken into violation? YES / NO If you	police custody or issued a citation for any criminal offense other t answered "YES", please explain:	han a minor traffic
	ted in attending the Teen Academy:	
EMERGENCY CONTACT IN	NFORMATION	
Full name of student's parent/	guardian:	
Address:		
	Email address:	
to 18 years of age. By signing because the Department of Motor Vehicles,	ne sole discretion of the Orange County Sheriff's Department. A pelow, I attest that the above information is true and correct and I criminial records and school records check.	• •
Mark your preferred Teen Academy Session		
Class 24 - 28, 2024 (City of Tustin)	Student's Signature	Date Signed
July 15 - 19, 2024 0800 - 1200 hrs	Parent/Guardian's Signature (A parent or legal guardian must sign if student is below 18 years of age)	Date Signed