MICHIGAN DISTRICT OF KIWANIS/MICHIGAN STATE POLICE
LAW ENFORCEMENT CAREER ACADEMY
JUNE 23-28 2024

APPLICATION DUE DATE TO KIWANIS CLUB BY: MARCH 15, 2024 (NO LATE APPLICATIONS ACCEPTED)
APPLICATION DUE DATE TO DISTRICT OFFICE NO LATER THAN: MARCH 31, 2024 (NO LATE APPLICATIONS ACCEPTED)

CHECKLIST: **Do NOT** submit application if all check items have not been completed.

- ☐ Currently in Grade 10, 11 or 12
- ☐ Sponsor Club Info Complete
- ☐ Agility Certification complete
- ☐ GPA of 2.0 or better
- ☐ Parent Signature below
- ☐ Counselor Signature below
- ☐ Applicant Signature below
- ☐ Completed Application submitted to local Kiwanis Club

ALL REQUESTED INFORMATION MUST BE PROVIDED. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

LAST NAME	FIRST NAME	M.I	MALE	FEMALE	DATE OF BIRTH	AGE

MAILING ADDRESS	CITY	STATE	ZIP CODE

(PLEASE PRINT CLEARLY, YOU WILL BE MAILED MATERIALS)

E-MAIL ADDRESS **(PLEASE PRINT CLEARLY)**	PRIMARY PHONE NUMBER

GRADE 10	GRADE 11	GRADE12	HEIGHT	WEIGHT	T SHIRT SIZE **(CIRCLE ONE)**		
					Medium	Large	X-Large

HIGH SCHOOL NAME	COUNSELOR SCHOOL & PHONE NUMBER	CUMULATIVE GRADE POINT AVERAGE

The following **signatures** are **required** and indicate your personal approval of your application:

	This student meets Scholastic, Citizenship and Attendance standards.

School Principal or Counselor

	I certify that the above information is complete and correct and that I am interested in a future career in Criminal Justice.

Academy Applicant

	I give my permission for the applicant to attend the Career Academy and permit my son/daughter to participate in all aspects of the Program.

Parent or Guardian Date

The Program will be located at the **Michigan State Police Training Academy, 7426 Canal Rd., Lansing, MI**
Arrival: Sunday, June 23 with Graduation on Friday, June 28, 2024.

The Reverse Side of this form must also be completed and submitted to the Sponsoring Kiwanis Club

- Applications will be processed in the order received
- **Absolute Deadline for Submission is March 31, 2024**
- Space is limited, preference given first to 12th graders, then GPA and Health and Agility

Applications should be returned to the Michigan District of Kiwanis **directly from the Sponsoring Kiwanis Club** along with the sponsor fee of $595 payable to the Michigan District of Kiwanis. Applications and checks from individuals without a Club sponsor can be sent directly to the Michigan District of Kiwanis, P.O. Box 231, Mason, MI 48854 and will be only be considered **after** all Kiwanis Club submissions.

HEALTH INFORMATION
All applicants will be notified and advised regarding their acceptance to the program by April 15. Applicants selected will be required to obtain a Physical Examination performed by a qualified health provider. **APPLICANTS SHOULD NOT OBTAIN THE PHYSICAL EXAM PRIOR TO BEING NOTIFIED OF ACCEPTANCE**.

AGILITY TEST
The following agility test should be administered by the Applicants **Physical Education teacher**, and completed by the applicant within a **10** minute period.

20 Sit Ups ***10 Push Ups*** ***½ Mile Run (within 4 ½ minutes)***

	I certify that the applicant completed the agility test within the prescribed time limit.

School Physical Education Official DATE

PARENT OR GUARDIAN CONTACT INFORMATION:

Parent Name (please print)

Parent Email (if different than student's)

Parent Daytime Phone (including area code)

Any questions regarding the Academy Program or application process should be directed to the Kiwanis Member or Club listed below.

TO BE COMPLETED BY THE SPONSORING KIWANIS CLUB (Please Print or Type)

Applicant is chosen as (**circle one**): DELEGATE ALTERNATE

SPONSOR: Kiwanis Club of _____

Kiwanis Contact: _____ Daytime Phone _____

Email Address: _____

Application and Check in the amount of $595, payable to the Michigan District of Kiwanis, mailed to Michigan District of Kiwanis, P.O. Box 231, Mason, MI 48854-0231