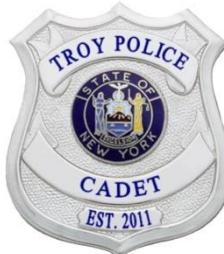


Troy Police Cadet Post 4102

DEVELOPING YOUTH THROUGH SERVICE

A 501(c)(3) Non-Profit Organization

Established 2011



MEMBERSHIP INFORMATION PACKET

CONTENTS:

- Advisor Contact Information**
- Cadet Post Membership Application**

THE TROY POLICE CADET POST 4102 IS A YOUTH ORGANIZATION DESIGNED TO EDUCATE YOUTH WHO ARE INTERESTED IN A CAREER IN LAW ENFORCEMENT. IT IS MANAGED AND OPERATED BY SWORN MEMBERS OF THE CITY OF TROY POLICE DEPARTMENT AS A PART OF THE NORTH EAST REGIONAL LAW ENFORCEMENT EDUCATIONAL ASSOCIATION (NERLEEA)



WWW.TROYPD.ORG



WWW.NERLEEA.ORG

Troy Police Cadet Post 4102

RECRUITMENT AND RETENTION COMMITTEE

**Officer Michael Bechard
Lead Advisor
(michael.bechard@troyny.gov)**

**Officer Adam Harbour
(adam.harbour@troyny.gov)**

FACEBOOK

<http://www.facebook.com/TPDcadetpost>



Troy Police Cadet Post 4102

MEMBERSHIP APPLICATION



PLEASE FILL OUT COMPLETELY AND WRITE <u>LEGIBLY</u>		Date of Application:	
PERSONAL			
Name:		Date of Birth:	Age:
Street Address:		City/Town	
Home Phone:	Cell Phone:	E-Mail:	
School:		Grade:	GPA:
Employer:		Position:	
REFERENCES			
1) Name:		Relationship:	
Phone:	E-Mail:		
2) Name:		Relationship:	
Phone:	E-Mail:		
3) Name:		Relationship:	
Phone:	E-Mail:		
PARENT/GUARDIAN INFORMATION			
Father:		Phone:	
Mother:		Phone:	
Other Guardian (if applicable):		Phone:	
At least one parental/guardian signature is required for applicants under the age of 18			
X _____		Date: ____ / ____ / ____	
PLEASE COMPLETE PAGE 2			

CONTINUED FROM PAGE 1

Please tell us how you heard about the TPD Cadet Post:

Please tell us why you are interested in joining the TPD Cadet Post:

Have you applied to any other Cadet/Explorer posts? (CIRCLE WHAT APPLIES) YES NO

Please tell us about your interests and hobbies:

Please tell us about your education and career goals:

Do you have any health concerns/disabilities preventing you from performing strenuous physical activity?

Have you ever been the subject of a criminal investigation? (CIRCLE WHAT APPLIES) YES NO

Have you ever been arrested? (CIRCLE WHAT APPLIES) YES NO

Applicant signature: _____ Date: ____/____/____

Parent/Guardian Signature: _____ Date: ____/____/____

(for applicants under 18)

I certify that I have read the above information contained within this application and understand that any false statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

Completed applications can be submitted by either mailing them to the following; Troy Police Cadet Post, Attn: Membership Committee, 55 State Street, Troy, NY 12180 or by dropping it off to the Troy Police Desk in a sealed enveloped labeled "Troy Police Cadet Post Application". The applicant will be contacted by an Advisor to schedule an interview when a position within the Cadet Post becomes available. It is the applicant's responsibility to ensure his contact information on file is up to date. Any questions, contact one of the Membership Advisors via email;

Officer Michael Bechard

michael.bechard@troyny.gov

Officer Adam Harbour

adam.harbour@troyny.gov

FOR MEMBERSHIP COMMITTEE USE ONLY - DO NOT FILL OUT

Date Application Received: ____/____/____ Advisor: _____

Date on Waiting List (if applicable): ____/____/____ Advisor: _____

Date references contacted: ____/____/____

REFERENCE NOTES: _____

Interview Date: ____/____/____ Time: _____ Location: _____