



Recommendation Form

All applicants for the Youth Police Academy must submit at least two recommendations from a teacher, advisor or any non-family member over 21. *The letters of recommendation must be on school or other applicable letterhead and include the name of applicant, and the name, position/title, phone number and email address of the person making the recommendation.*

INSTRUCTIONS FOR THOSE SUBMITTING RECOMMENDATIONS

The Selection Committee is aware of the time necessary to prepare a letter of recommendation and greatly appreciates your help. Please make sure the applicant has an interest in the function of the police department or in a career in law enforcement. These youth will be exposed to a variety of information not suitable for all teens. ***Please include in the letter how you feel the student would benefit/contribute to the Youth Citizen's Police Academy.***

STUDENT NAME _____

Please rate the student in the following areas using the scale below:

5-Superior	4-Above Average	3-Average	2-Below Average	1-Well Below Average
___ Dependability	___ Maturity	___ Interest in community affairs		
___ Responsibility	___ Concern for others	___ Ability to follow directions		
___ Leadership	___ Conduct	___ Ability to work with others		

Please return this sheet with the letter of recommendation. Thank you.

Signature of Reference

Date