**Maricopa County Sheriff’s Office** Law EnforcementAgency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Law Enforcement Cadet Academy**

**Registration Form**

**Class 23-07** Post # \_\_\_\_\_\_\_\_\_\_\_\_

*(Print All Information Legibly)*

***Explorer/Cadet Recruit Information***

Last Name  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  First Name  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  MI.  \_\_\_\_

DOB  \_\_\_\_\_\_\_\_  SS #  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Height \_\_\_\_\_\_  Weight  \_\_\_\_\_  Eyes  \_\_\_\_  Hair  \_\_\_\_

White \_\_\_  Hispanic  \_\_\_  Asian  \_\_\_  Black  \_\_\_  Native American  \_\_\_  Other  \_\_\_

Male  \_\_\_  Female  \_\_\_

Drivers License / State ID #  \_\_\_\_\_\_\_\_\_\_\_\_\_\_  State  \_\_\_  Expiration Date  \_\_\_\_\_\_\_\_\_

Address  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Apt #  \_\_\_\_\_\_\_\_\_

City  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  State  \_\_\_\_  Zip Code  \_\_\_\_\_\_\_\_

Home Phone  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Cell  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  e-mail  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you drive a car?  \_\_\_\_\_  Registered Owner’s Name  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Year   \_\_\_   Make  \_\_\_\_\_\_\_\_ Model  \_\_\_\_\_\_\_  License Plate  \_\_\_\_\_\_\_\_\_\_\_\_  State  \_\_\_

***If under 18 yrs old write in Parent or Guardian Information***

Mother’s Last Name:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  First Name:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Work  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Cell  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father’s Last Name:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  First Name:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Work  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Cell  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***If 18 yrs or older write in emergency contact information for two people***

Last Name:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  First Name:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Work  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Cell  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Name:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  First Name:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Work  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Cell  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_