Police Academy
APPLICATION

Date of Application: _____

Name:	Date of Birth:	WCJC Student ID _or_ Social Security #:

Mailing Address:

Email Address:	Telephone #:

Please make a selection for your course preference:

Richmond Campus (_Evening Class_):   _____
    Class begins in August and completes in June

Wharton Campus (_Day Class_):   _____   _____
                                      Summer/Fall Semester   Spring Semester

    Summer/Fall Semester - Class begins in July and completes in December
    Spring Semester - Class begins in January and completes in June

Please return completed application to:
    Wharton County Junior College
    Police Academy
     911 E. Boling Hwy
     Wharton, Tx 77488

    Email: guint@wcjc.edu or smithg@wcjc.edu

    The required Academy packet will be issued once prepared by Academy Staff.