



- checkbox SUMMER
checkbox FALL/WINTER
checkbox SPRING

APPLICATION FOR ADMISSION

READ CAREFULLY. WRITE CLEARLY WITH BLUE OR BLACK INK. PLEASE SIGN APPLICATION.

Form with numbered sections 1-27 containing fields for personal information, address, residency, education, and contact details.

TO BE SIGNED BY ALL APPLICANTS

I declare under penalty of perjury that the statements and information submitted in this admissions application are true and correct. I understand that all materials submitted by me for purposes of admission become the property of the South Bay Regional Public Safety Training Consortium.

STUDENT SIGNATURE and DATE fields