

# **2023 HUTCHINSON CITIZENS POLICE ACADEMY**

**\*\*\*Application Deadline-October 27, 2023\*\*\***

Submit completed form to: [berlandson@hutchinsonmn.gov](mailto:berlandson@hutchinsonmn.gov) or Sgt Ben Erlandson  
214 1<sup>st</sup> Ave NE  
Hutchinson, MN 55350

**Eligibility: Must live or work within the City of Hutchinson.  
For special considerations, please contact Sgt Ben Erlandson.**

**Name:** \_\_\_\_\_  
                    **First**                                    **Middle**                                    **Last**

**Address:** \_\_\_\_\_

**City/Zip Code:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Shirt Size:** S M L XL XXL

**Phone:** \_\_\_\_\_  
                    **Home**                                    **Work**                                    **Cell**

**Driver's/ID #** \_\_\_\_\_

## **EMPLOYMENT:**

**Employer** \_\_\_\_\_ **Address** \_\_\_\_\_  
**Job Title** \_\_\_\_\_ **Duties** \_\_\_\_\_

## **EDUCATION:**

**High School** \_\_\_\_\_ **Dates** \_\_\_\_\_  
**College** \_\_\_\_\_ **Dates** \_\_\_\_\_  
**Other** \_\_\_\_\_ **Dates** \_\_\_\_\_

## **REFERENCES: List two persons, not related as references.**

<b>Name:</b> _____	<b>Name:</b> _____
<b>Address:</b> _____	<b>Address:</b> _____
<b>Phone:</b> _____	<b>Phone:</b> _____

**Why do you wish to attend and be considered?**

---

---

---

**List all previous traffic violations, citations, and police contacts within last five years:**

---

---

---

## **EMERGENCY CONTACT:**

**Name:** \_\_\_\_\_  
**Relation/Contact #:** \_\_\_\_\_