



Eagan Police Department and FBI
YOUTH LEADERSHIP ACADEMY
June 10-13, 2024 - Eagan, MN

2024 Youth Leadership Academy Application

In the tradition of the Eagan Police Department and the Federal Bureau of Investigation, Minneapolis, the mission of the Youth Leadership Program is to provide a foundation in ethical and moral leadership that encourages our students to further develop the knowledge, skills and abilities necessary to accept the challenge of leadership as a way of life.

The Eagan Police Department, in partnership with the Federal Bureau of Investigation, Minneapolis, are hosting the fourth annual Youth Leadership Academy. The academy is a four-day program of classroom study, physical challenges, guest lectures, and leadership experiences. The program focus is on leadership, ethics, and personal development.

The YLA is limited to 25 students ages 14-17 from the Twin Cities areas. The selection process is therefore highly competitive. Any interested student must submit their application to the Eagan Police Department. The Eagan Police Department will review the applications and supporting materials and select the candidate's applications. The Eagan Police Department will verify the selected candidates' qualifications and provide them with additional information to prepare for the academy.

Applicants must complete all elements of the following pages and sign the application certifying the information.

The application must be submitted electronically to the Eagan Police Department by e-mailing it to eaganpd@cityofeagan.com by Friday, April 12, 2024. Please read the application carefully and complete it entirely.

Any questions about the application or the application process can be referred to Katy Jonas at eaganpd@cityofeagan.com.

The application is scored as follows:

- Maximum 40 points - Applicant Essay
- Maximum 30 points - Applicant's Community Involvement and Volunteering
- Maximum 30 points - Extra Curricular School Activities

2024 Youth Leadership Academy Application

APPLICANT

Last Name: _____ First Name: _____ Middle Initial: _____

Age: _____ Date of Birth: _____ Sex: ___ Male ___ Female

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Home Phone: _____ Cell Phone: _____

Email: _____

School: _____

City: _____ State: _____

PARENT(S) OR LEGAL GUARDIAN(S)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email: _____

LIST YOUR COMMUNITY INVOLVEMENT/VOLUNTEERING ACTIVITIES: *These activities include participation in community service organizations, scouting, etc.; volunteer service through individual, community or faith based activities; and other community involvement.*

- 1.) _____
- 2.) _____
- 3.) _____
- 4.) _____
- 5.) _____

Use additional sheets if needed

LIST YOUR EXTRA-CURRICULAR ACTIVITIES: *These include school sponsored organizations and activities (e.g.: choral, debate teams, yearbook or newspaper, science or computer clubs, etc.) and organized athletics (school or club affiliated.)*

- 1.) _____
- 2.) _____
- 3.) _____
- 4.) _____
- 5.) _____

Use additional sheets if needed

ESSAY: Please attach your essay when submitting your application.

For the essay portion, the following questions need to be answered. The essay should be no more than two pages typed.

- Please tell us about yourself and why you feel you are a good candidate for this program.
- What is your definition of a leader?
- What do you feel is a good example of leadership?
- Please describe a model you think fits the definition you just explained. It can be a personal story or organization you admire.

_____ Essay

APPLICANT'S SIGNATURE: _____ **Date:** _____

PARENTAL CONSENT

I understand my son/daughter will be attending the Eagan Police Department Youth Leadership Academy and will be under the supervision of a member of the Eagan Police Department. With this understanding, I approve of his/her participation in this program.

Parent /Guardian Signature: _____ Date: _____

Print Name: _____

TO BE COMPLETED BY THE EAGAN POLICE DEPARTMENT:

Name: _____

Rank: _____