



Borough of
State College Police Department

243 South Allen Street, State College, PA 16801
Website: www.statecollegepa.us/Police
Phone: (814) 234-7150
Fax: (814) 231-3070



Internship Program Application

(Please Print All Information)

Applicant

Full Name: _____
(first) (middle) (last)
Driver's License: State: _____ Number: _____
Current/Local Address: _____
Permanent Address: _____
Home Phone: _____ Cell Phone: _____
Email: _____

Emergency Contact Person

Name: _____ Relationship: _____
Address: _____
Home Phone: _____ Cell Phone: _____

Academic Background

Current College/University: _____
City: _____ State: _____ GPA: _____
Major/Area of Study: _____
Faculty Advisor: _____ Phone: _____
Do you plan on getting class credit: _____ Semester: _____
Semester Start Date: _____ Semester End Date: _____

Background Information

Have you ever been charged with any of the following: (please circle or check all that apply)

- Felony? Yes or No
- Misdemeanor? Yes or No
- Summary? Yes or No
- Traffic? Yes or No
- Involved/Served in a civil process? Yes or No

If yes, provide details:

Personal Profile

Motivation for seeking police internship:

List any skills that may be helpful to you as an intern:

What are your career goals and objectives?

The above information is true and correct to the best of my knowledge.

Signature: _____ **Date:** _____