

Sacramento County District Attorney's Office

ANNE MARIE SCHUBERT District Attorney

Rod Norgaard Chief Deputy

Michael M. Blazina Assistant District Attorney

2021-2022 "Virtual" Youth Academy Application

Registration deadline is September 14, 2021

The Youth Academy is open to high school students within Sacramento County and provides the opportunity to learn about the criminal justice system, member agencies and engage in open communication with law enforcement in our community. Space is limited and applications will be accepted in the order received. **Enrollment is on a first come, first served basis.**

A signed permission slip from your parent/guardian	is required with your application.
Name:	
DOB:	Female
Address:	
City/State/Zip:	
Email Address:	
Phone:	
School:	Grade:
Parent/Guardian:	
Parent/Guardian Phone:	Email:
Please answer the following questions (include a	separate sheet of paper if necessary):
1. Why do you want to be part of this academy	y?
2. What do you hope to learn from this acaden	ny?
4. Have you participated in this academy before	

Applications and permission slips should be emailed to: youthprograms@sacda.org

Questions or scanned applications can also be sent to <u>youthprograms@sacda.org</u> or call 916.874.5251.



Parent Contact Information

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2021-2022 YOUTH ACADEMY

The Youth Academy will be conducted virtually this year, with the possibility of an in-person field trip and graduation ceremony.

PARENT/GUARDIAN STATEMENT OF CONSENT

I hereby give consent to the Sacramento County District Attorney's Office for my child to participate in the "Virtual" Youth Academy (YA). I understand that my child will be under the supervision of designated employees from the participating county and state agencies.

I understand and agree that the program will be held virtually via zoom this year, and during the course of the program the students may be photographed or videoed for use on the District Attorney's website and social media sites to promote and publicize this and other programs.

I have also reviewed the "Code of Conduct" below with my child.

Name:	Relationship:	Phone:
This consent is for:		
	Student's Name (Print)	
Authorized by:		
•	Signature of parent/guardian	Date
	CODE OF CONI	OUCT
Participants of the Youtl	n Academy are expected to:	
 Follow instr 	ructions given.	
Be respectful	al of all District Attorney Personnel, guest sp	eakers, and fellow students.
*Failure to follow the e	stablished guidelines may result in your d	ismissal from the program.
	, agree t	o participate in the Youth Academy,
	UDENT NAME	
and adhere to the above-	mentioned guidelines.	
STUDENT SIG	NATURE	DATE