



Draper City Police Department Internship Application

Name: _____ Date of Birth: _____

Phone Number: _____ Alternate Phone Number: _____

Address (including City, State, Zip): _____

Education Information

School: _____ Academic Year/Expected Graduation: _____

Major: _____ Cumulative GPA: _____

Please include transcript with application for GPA verification

Professional/School/Career References

Name: _____ Phone Number: _____

E-mail Address: _____

Relationship to Applicant: _____

Name: _____ Phone Number: _____

E-mail Address: _____

Relationship to Applicant: _____

Availability

****Official scheduled hours can be between 6:00am-430pm, callouts may occur at any time outside of scheduled hours****

Semester: ☐ Spring ☐ Summer ☐ Fall

Available days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Anticipated hours & number of days: _____

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DRAPER CITY

CHIEF RICH FERGUSON

Please describe your career goals and why you would like to be considered for an internship at the Draper City Police Department:

Additional Information/Comments:

Signature: _____ Date: _____

Applications must be submitted by:

Spring Semester: November 1st

Summer Semester: March 1st

Fall Semester: June 1st

****Please email the completed form and transcript to kelsea.hone@draperutah.gov****

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(801) 576-6300 | 1020 E Pioneer Road | Draper, UT 84020