



# Law Enforcement Career Camp

## July 27-Aug 1, 2025

(subject to change by The American Legion, Department of Oregon, Oregon Dept of the Military, or the Oregon State Police)

Complete the applicant information, then have your parents and school complete their respective sections. This program is open to all male and female high school students enrolled in school as of June 27, 2025. Applicants must be of good moral character and present a well-groomed appearance. The Law Enforcement Career Camp is open to all regardless of race, color, religion, gender, or nationality.

**\*If you have any criminal adjudications on your record, you are not eligible to participate in this camp.**

Express Application Form		
Name of Applicant		Applicant Cell Phone
Mailing Address		Polo Shirt Size Small _____ Med _____ Large _____ X-Large _____
Parent Name	Parent Email	Parent Phone
Have you attended LECC before? Yes <input type="checkbox"/> No <input type="checkbox"/> Date _____	Have you applied for LECC but were not selected? Yes <input type="checkbox"/> No <input type="checkbox"/> Date _____	Gender
Birthday	Applicant Signature	

### Parent Permission:

My child is a legal resident of Oregon and has permission to attend Law Enforcement Career Camp (LECC). My child is in good physical and mental condition with exceptions noted. The American Legion may use your child's likeness (photo, video, audio) or share information gathered concerning their attendance for promotional purposes. I understand The American Legion will not pay any compensation or fees to promote its programs. I acknowledge that my child might be exposed to topics or language of an adult nature. I certify my son or daughter meets school certification requirements. Graduation requires your child to participate for the entire program. I hereby release The American Legion, Law Enforcement Career Camp, and all their members, staff, and officers from any liability that my child/children suffered during or because of participation in this event, including but not limited to physical or psychological injuries and I will indemnify and hold them harmless for any damage caused or liability incurred by my child/children.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**To be completed by a school official**

**School Certification:** I hereby certify that the above-named student is in good academic standing, does not have a negative disciplinary record and will enrolled in high school on July 1, 2025.

School Name	School Location
Student Awards	School Activities
School Offices Held	
Printed School Official Name	
School Official Signature	Date

**To be completed by the sponsoring American Legion Post AFTER the interview**

**American Legion Authorization:** This is to certify that a representative of our Post met with this Candidate personally and agrees that he/she meets all requirements for participation in the Law Enforcement Career Camp.

Post Number	Commander or Chairman Printed Name	
Commander or Chairman Signature		Date
Address	City	Zip Code
Email	Home Phone	Cell Phone

**Application Submission & Fee Instructions:**

This application with fee paid in the amount of \$350 must be received before June 27th, 2025. \$50 of the fee should be the responsibility of the student and is given to the sponsoring post. The sponsoring post will send the total \$350 (\$50 student portion plus \$300 sponsor fee) to The American Legion, Department of Oregon. Make check out to American Legion Dept of Oregon with applicant's name in memo line and mail to American Legion Dept of Oregon PO Box 1730 Wilsonville, OR 97070. In the event the applicant is not accepted, the sponsorship fee will be returned to the sponsoring post.