

APPLICATION FOR ADMISSION

Directions: (1) Mail this application to the Director at DCI's mailing address:
USC Delinquency Control Institute
650 Childs Way, RGL 312
Los Angeles, CA 90089

You may also email it to: **dci@usc.edu**

(2) Accompany this application with a letter of recommendation from the head of your department.

I hereby apply for acceptance in the Delinquency Control Institute program. Dates _____ to _____ Class No. _____

1. PERSONAL:

Name: _____ POST ID#: _____

Home Phone: () _____ Cell Phone: () _____

Personal Email: _____

Home Address: _____
street city/state zip code

Whom should we notify in case of emergency?

Name: _____ Telephone: () _____

Address: _____
street city/state zip code

2. CURRENT EMPLOYMENT:

Present Position: _____ Agency: _____

Work Hours: _____ Work Phone: _____

Work Email: _____ Work Fax: _____

Work Address: _____
street city/state zip code

Duties and Responsibilities: _____

Please write 'p' beside your preferred email and phone number.

3. CRIMINAL JUSTICE EXPERIENCE:

Please indicate any criminal justice experience prior to your current position. Include any specialization (e.g., child abuse, crime prevention, etc.):

<u>Position</u>	<u>Agency and Address</u>	<u>Dates</u>
1) _____	_____	_____
Duties & Responsibilities: _____		
2) _____	_____	_____
Duties & Responsibilities: _____		
3) _____	_____	_____
Duties & Responsibilities: _____		

4. EDUCATION: (check highest level attained)

_____ GED	_____ Some Graduate Work
_____ High School Diploma	_____ Master's Degree
_____ Some College	_____ Professional Degree
_____ Associate of Arts (2 yrs)	_____ Other (Specify):
_____ Bachelor's Degree	_____

Name and Address of Last School Attended:

Major: _____ Degree: _____ Date: _____

a. Have you ever received credit for any course in the University of Southern California School of Public Administration, or School of Policy, Planning, and Development? _____ If yes, please list your student ID# and indicate course(s), credit hours, where taken, & date:

b. Have you ever participated in any other DCI program? _____ If yes, give course title and dates:

5. TUITION FEES:

DCI tuition for academic year 2009-2010 is currently \$7,794 (\$1,299/unit x 6 units). Please initial below that you have read and understand that you or your agency will be responsible for paying this amount for you to attend the DCI program for six weeks, beginning January 11 through February 19, 2010.

Initial: _____

If accepted into the DCI program, you will be mailed a green, limited status enrollment form to be completed, signed and mailed back to us in order to register you in the course. Please note that all application materials (including the limited status enrollment form), must be received by our office no later than January 5, 2010 for the January 11 - February 19, 2010 course (Class 129).

I hereby certify that the information I have provided is true and correct and that I have read and understand the above policy on registration.

Signature Date

Note: You must attach a letter of recommendation from your supervisor or agency head.