



## FBI Little Rock Teen Academy Application

Application / Student Information			
Full Legal Name: <small>(Last, First, Middle)</small>			
Preferred Name:	Gender:	Pronouns:	
Home Address: <small>(Address, City, State, Zip)</small>			
School Email:		Personal Email:	
Personal Phone:		Alternate Phone:	
Date of Birth:		Social Security Number: <small>(ages 16 and up only)</small>	
Referred by:		Relationship to Student:	
Reference Phone:		Reference Email:	
List school and community activities for the past two years and note any leadership roles served. (Add page if needed.)			

Parent / Guardian Information			
Full Legal Name: <small>(Last, First, Middle)</small>			
Home Address: <small>(Address, City, State, Zip)</small>			
Personal Phone: <small>(Daytime)</small>		Alternate Phone: <small>(Daytime)</small>	
In case of emergency contact:		Emergency Phone:	

## School Information

School Name:			
School Address: <small>(Address, City, State, Zip)</small>			
School Official's Name:		School Official's Title:	
School Official's Phone:		School Official's Email:	
Student's Grade in 2025/2026 School Year:		Student's Unweighted GPA:	
School Official's Signature:			Date:

*\* "School officials" include principals, administrators, counselors, and teachers. If you need further clarification, contact FBI Community Outreach Specialist Jessica Franklin.*

## Background Information

The FBI Little Rock Teen Academy is on Friday, April 4, 2025 and is open to high school students between the ages of 15-18 years of age. Punctuality, professional behavior, and appropriate dress will be required of all students participating in this program.

The FBI's Teen Academy program is designed to bring a diverse set of students together to develop leadership skills and to explore various career options. This program is not exclusive to students interested in criminal justice. The selection process is competitive, and all students should give their best effort in completing this application. A selection committee will evaluate each application based on a review of the information provided, and no single element is disqualifying. See our website at [www.fbi.gov/contact-us/field-offices/littlerock/community-outreach](http://www.fbi.gov/contact-us/field-offices/littlerock/community-outreach) for more information on our selection criteria. If possible, we recommend that the student fill out the application electronically.

Whether typed or hand-written, illegible applications or applications scanned at a low quality will not be reviewed. Likewise, incomplete or late applications will not be accepted.

This application and any supplementary materials must be received by Friday, February 7, 2025 or review. Submit applications by email to Jessica Franklin at [jlfranklin2@fbi.gov](mailto:jlfranklin2@fbi.gov).

### Student Participation Agreement

I am applying for admission to the Federal Bureau of Investigation (FBI) Teen Academy program. I certify that the information provided in this application is true and complete to the best of my knowledge, and I understand that the omission or falsification of any piece of this application will be sufficient reason for disqualification. I also understand that any essay that may be submitted as part of this application must be my own work. I also certify that I did not use any artificial intelligence (AI) application to write this essay.

If selected, I understand that failure to comply with all rules and regulations established by the FBI before and during the academy will result in immediate dismissal from the program.

Student Printed Name
Student Signature
Date

### Parent/Guardian Releases (Required)

#### General Release

As the parent or guardian of \_\_\_\_\_, I give my permission for this student to participate in the Federal Bureau of Investigation's Teen Academy as part of its Community Outreach Program.

I hereby acknowledge that I have chosen to voluntarily allow the above-named child to participate in this activity at FBI facilities or elsewhere. I hereby assume full responsibility for any personal injury or damage to property which may occur directly or indirectly as a result of this child's participation.

To the extent permitted by law, I, along with my heirs and assigns, hereby agree to hold harmless, release, discharge, and indemnify the United States, the FBI, and the personnel, agents, and employees thereof, from any and all claims, demands, causes of action, and damages should any be found, resulting or arising from this child's participation.

## Privacy Act Notice

FBI security processes state that anyone 16 years of age and older who will be participating in this program may be subject to a limited background investigation to include a review of law enforcement criminal records. As part of that process, we request those 16 years of age and older provide their Social Security number.

The collection of information on this form is authorized by Title 28, United States Code, section 533; Title 28, Code of Federal Regulations, section 0.85; and Department of Justice Order 2600.2D, Security Programs and Responsibilities (June 16, 2011). The Social Security number is requested as authorized by Executive Order 9397 (Nov. 30, 1943), as amended by E.O. 13478 (Nov. 18, 2008). The information is collected to maintain the security of FBI personnel, facilities, and information systems. Providing the requested information is voluntary; however, failure to provide the requested information may result in the applicant not being selected to attend the FBI Teen Academy program. The information the applicant provides will be maintained in the FBI's Central Records System (Justice/FBI-002), notice of which was published in the Federal Register and may be viewed at <https://www.fbi.gov/services/records-management/foipa/fbi-privacy-act-systems>. The information provided may be used in accordance with the routine uses contained in that notice or as otherwise authorized by law.

## Medical Release

Should it be necessary for the above-named child to receive medical treatment while participating in an FBI program, I hereby give the FBI personnel permission to use their best judgment in obtaining medical services, and I give permission to the medical professional selected by the FBI personnel to render medical treatment deemed necessary and appropriate until I can be reached. I understand that the FBI has no insurance covering such medical or hospital costs; therefore, any cost incurred for such treatment shall be my sole responsibility.

<input type="text"/>
Parent/Guardian Printed Name
<input type="text"/>
Parent/Guardian Signature
<input type="text"/>
Date

## Parent/Guardian Releases (Optional)

### *Photo/Video Release*

During any FBI community outreach, recruitment, public affairs, or other event, an FBI employee may photograph and/or video record the event or activity.

By signing this consent/release form, I agree that my child's image appearing in any such photograph and/or video may be used by the FBI in print and/or electronic media, including, but not limited to, the FBI's public websites and subsites (such as FBI.gov, FBI.gov field office accounts, and FBIJobs.gov) and social media platforms (including, but not limited to, X, Facebook, Instagram, and YouTube), for purposes of community outreach, recruitment, and public affairs messaging. This permission includes the right for the FBI to record, edit, reproduce, distribute, display, or create derivative works of these images and recordings. The FBI will own all rights to the images and recordings it produces, however, they may be downloaded by anyone; be repurposed by other government agencies, the public, or the media; and/or appear in internet searches (Google, Yahoo, Bing, etc.)

I agree            do not agree            that my child's image may be captured by photo or video.

If I authorize my child's image to be captured, my child's name may            or may not            be used with this photo/video.

Parent/Guardian Printed Name
Parent/Guardian Signature
Date

**Applicant Checklist**

- Student Application
  - ☐ Student information complete
  - ☐ Parent/Guardian information complete
  - ☐ School and endorsing school official information complete
  - ☐ Participation agreement signed by student
  - ☐ Release/indemnity forms signed by parent/guardian

Students are expected to show leadership throughout this process. This includes being personally accountable for ensuring this application is filled out accurately and completely. Students are also expected to advocate for themselves to include asking for further information about the FBI Teen Academy or this application process, if necessary. Students may request information by contacting [jlfranklin2@fbi.gov](mailto:jlfranklin2@fbi.gov) at any time.

The FBI will notify students of their application status by email no later than Friday, February 14, 2025. Students selected to participate in the FBI Teen Academy will be given additional information about the program and will be required to confirm their acceptance into this program. If selected students do not respond to the acceptance email by the deadline given, the student's application will be discontinued.