



SUBURBAN LAW ENFORCEMENT ACADEMY
College of DuPage



INFORMATIONAL CONTACT PERSON(S)

Recruit: _____

Agency: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email Address: _____

Chief/Sheriff: _____

Administrative contact person available on a daily basis to answer questions and/or supply clerical information:

Name: _____ Title: _____

Phone Number _____ E-mail address: _____

Secondary Administrative contact person available on a daily basis to answer questions and/or supply clerical information:

Name: _____ Title _____

Phone Number _____ E-mail address: _____

Name of primary contact person, person responsible for recruit on-site:

Name: _____ Title: _____

Phone Number: _____ E-mail address: _____

Name of secondary contact person, person responsible for recruit on-site:

Name: _____ Title: _____

Phone Number: _____ E-mail address: _____