

Call or Email application:  
[codecompliance@mcallen.net](mailto:codecompliance@mcallen.net)  
(956)681-1900



Application Date: \_\_\_\_\_

**City Of McAllen**

Application for:

**Code Academy & Citizen Scientist Program**  
**Applicant Information**

Full Name: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address Apartment/Unit #

\_\_\_\_\_ City State ZIP Code

Phone: \_\_\_\_\_ *Email* \_\_\_\_\_

Emergency Name: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

**Code Zone:**  
\_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_