



Borough of Metuchen
AUXILIARY POLICE OFFICER APPLICATION

Municipality: METUCHEN

County: MIDDLESEX

Date: _____

***PLEASE FILL OUT WITH AN INK PEN**

***PLEASE PRINT**

Name: _____
Last First Middle

Home Address: _____
(NUMBER) (STREET NAME)

City: _____ State: _____ Zip Code: _____

DOB: _____ Social Security Number: _____

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

Phone Number (Work): _____

Please indicate which number is the best to reach you: Cell (O) or Home (O)

Male: _____ Female: _____

Height: _____ Weight: _____ Eyes: _____ Hair: _____

Place of Birth: _____

Are you a citizen of the United States? Yes: _____ No: _____

Marital Status: Single (O) / Married (O) / Separated (O) / Divorced (O) / Widowed (O)

E-Mail Address: _____



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MOTOR VEHICLE INFORMATION

Driver's License Number: _____

License Expiration Date: _____

Has your Driver's License ever been Revoked or Suspended? Yes: _____ No: _____

Have you ever received a Motor Vehicle Summons? Yes: _____ No: _____

If yes please List Date, Type of Violation and Disposition of Summons:

PHYSICAL CONDITION

Good: _____ FAIR: _____ POOR: _____

Do you have any medical conditions that might impair you from performing some tasks?

Yes: _____ No: _____

Physical (back, knee, arm, etc.):



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EDUCATION

	NAME	CITY / STATE	Highest Year Completed	DID YOU GRADUATE? YES / NO
HIGH SCHOOL				
COLLEGE				
TECHNICAL				
OTHER / GED				

CURRENT EMPLOYMENT OR SCHOOLING

Occupation: _____

Name of Company / School: _____

Address: _____
(NUMBER) (STREET NAME)

City: _____ State: _____ Zip Code: _____

Normal Work Hour: _____
(Days) (Hours)

Supervisor Name: _____
Last First

Contact Number: _____

May we contact this employer? Yes: _____ No: _____



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PREVIOUS EXPERIENCE

Do you have any previous POLICE / SECURITY / MILITARY experience? Yes: _____ No: _____

If yes please Explain:

CRIMINAL HISTORY

Have you ever been arrested, convicted or Indicted of a Crime other than a Motor Vehicle Violation?

Yes: _____ No: _____

If yes please list date(s) Brief detail of event and disposition of case:

Do you possess any firearms? Yes: _____ No: _____

Please list:

<i>Make</i>	<i>Model</i>	<i>Serial Number</i>



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Have you ever applied to the Metuchen Auxiliary Police Department before?

Yes: _____ No: _____

If yes, When? _____

Have you ever been an Auxiliary Police Officer before? Yes: _____ No: _____

If yes, When and Where? _____

Have you applied to become an Auxiliary Police Officer with other agencies? Yes: _____ No: _____

If yes, where? _____

Would you be available for:	Emergency Callouts: Yes: _____	No: _____
	Holiday Events: Yes: _____	No: _____
	Weekend Events: Yes: _____	No: _____

Do you understand Auxiliary Police Officers are volunteers and do not get compensated:

Yes: _____ No: _____

How did you learn of the position? Internet (O) Referral (O) Other (O)

If other, Please Explain:



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CONSENT AGREEMENT

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for my volunteer position as may be necessary in arriving at a volunteer position decision. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand that this volunteer position is contingent upon a possible physical examination which may include a drug screening and successful completion of the probation period.

In consideration of my volunteer position, I agree that my volunteer position and compensation could be terminated with or without cause and with or without notice at any time, at the option of the volunteer organization, or myself. It is expressly understood that my volunteer position with the Borough of Metuchen is at will.

APPLICANT SIGNATURE: _____

APPLICANT PRINT NAME: _____

DATE: _____