

METUCHEN POLICE DEPARTMENT CITIZEN POLICE ACADEMY APPLICATION

LAST NAME _____ FIRST _____ M.I. ____

DATE OF BIRTH ___/___/___ AGE ___ SEX: MALE FEMALE CITIZEN: YES / NO

MARITAL STATUS: SINGLE MARRIED SEPERATED DIVORCED WIDOWED

SHIRT SIZE: SM ___ MED ___ LG ___ XL ___ OTHER, PLEASE LIST _____

SOCIAL SECURITY NUMBER _____ - _____ - _____ HOME TELEPHONE NUMBER _____ - _____ - _____

HOME ADDRESS _____
NUMBER STREET CITY STATE ZIP

E-MAIL ADDRESS _____

PRESENT EMPLOYER

NAME/COMPANY CITY STATE ZIP

OCCUPATION _____ WORK TELEPHONE NUMBER _____ - _____ - _____

HIGHEST LEVEL OF EDUCATION: HIGH SCHOOL G.E.D COLLEGE OTHER

COLLEGE DEGREE(S) OR PROFESIONAL
LICENSES? _____

DRIVERS LICENSE NUMBER _____

IS YOUR DRIVERS LICENSE CURRENTLY SUSPENDED OR REVOKED IN NEW JERSEY
OR ANOTHER STATE? Y N

HAVE YOU EVER BEEN ARRESTED FOR, CHARGED WITH OR CONVICTED OF AN
INDICTABLE CRIME, DISORDERLY PERSONS OFFENSE, OR A CITY OR TOWNSHIP
ORDINANCE VIOLATION? YES NO

IF YES, PROVIDE DETAILS OF EVENT, DATE AND
DISPOSITION _____

LIST ANY CIVIC ORGANIZATIONS, ASSOCIATIONS, CLUBS OR GROUPS YOU BELONG
TO

EXPLAIN BREIFLY WHY YOU WISH TO BE ENROLLED IN THE CITIZEN POLICE
ACADEMY _____

CERTIFICATION

I CERTIFY THAT ALL OF THE STATEMENTS MADE IN THIS APPLICATION ARE TRUE, COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND ARE MADE IN GOOD FAITH. I AM AWARE THAT ANY MISREPRESENTATION OF ANY INFORMATION SUPPLIED BY ME WILL RESULT IN MY DISQUALIFICATION FROM ATTENDING THE BOROUGH OF METUCHEN POLICE DEPARTMENT CITIZEN POLICE ACADEMY CLASS.

I ALSO UNDERSTAND THAT ANY CRIMINAL RECORD WILL PRECLUDE ME FROM PARTICIPATING IN THE CITIZEN POLICE ACADEMY CLASS.

FURTHER I HEREBY AUTHORIZE THE METUCHEN POLICE DEPARTMENT TO VERIFY ANY AND ALL INFORMATION CONTAINED HEREIN AND TO REVIEW ANY EMPLOYMENT, EDUCATION, CRIMINAL HISTORY, MOTOR VEHICLE RECORD, AND OTHER RECORDS AND INFORMATION FROM ANY SOURCE AS NOTED IN THIS DULY EXECUTED AUTHORIZATION AND RELEASE FORM.

I HAVE READ THIS CERTIFICATION AND I UNDERSTAND AND AGREE TO THE CONDITIONS IMPOSED HEREIN.

DATE: _____

SIGNATURE: _____

PRINT NAME: _____