APPLICATION for the POLICE SERVICE

Ship Bottom Police Department

Ship Bottom is an Equal Opportunity Employer

FOLLOW INSTRUCTIONS CAREFULLY

IMPORTANT (Use typewriter or Block Print)

ype of	application	Class 1	Class 2	Full T	me Officer			
			1-	PERSONAL	HISTORY			
1-	Date			Your P	hone Number:			
	Name							
	•	er legally chang	rst ged your name?	_	Middle No		Last	
			Date		Place		Court	
2-			city, state, zip code	-				
2 – A 3 – If	Age	e any social med ver declared ban e any outstandin o you reside? e, Married, Sepa ou live with your	Weight Do you wear lia accounts? If yes	r glasses? , list name a	r color	Complexion No ecific platform:		
	IEN	WHERE			SPOUSES'S	NAME AND AD	DRESS	
WH								
WF		_						
Wh								
	ive following	information cor	ncerning your pare	nts and you	r spouse			
	ive following	information cor	ncerning your pare	nts and you	r spouse ADDRESS	L	IVING	PLACE OF BIRTH
5 – G			ncerning your pare	nts and you		L	IVING	PLACE OF BIRTH
5 – G Father		NAME	ncerning your pare	nts and you		L	IVING	PLACE OF BIRTH
5 – G Father Mothe		NAME	ncerning your pare	nts and you		L	IVING	PLACE OF BIRTH
5 – G Father Mother	er's Maiden N	NAME	ncerning your pare	nts and you		L	IVING	PLACE OF BIRTH

	HOW		TO V	TO WHOM WAS DIVORCE GRANTED			
parated							
vorced							
nulled							
1 – List below every child l	born to you.						
NAME	DATE OF	PLACE OF I	BIRTH	WITH WHOM	1 AND WHERE RESIDES		
	BIRTH	. 2.02 0					
2 – Are you now supportir	ng all children bo	rn to you, adop	ted by you	and stepchildren?			
3 – Have you ever been in	volved as a defer	ndant in a pate	rnity proce	eding?			
If yes, give full details							
4 – Have you or any memb	ber of your imme	diate family ev	er been arı	ested or convicted of	a crime?		
NANAE	DELAT	I ONCLUD	CDI	NAT CONANAITTED	MULEDE ADDECTED		
NAME	RELAT	IONSHIP	CRI	ME COMMITTED	WHERE ARRESTED		
DATE	PI	LACE		CHARGE	DISPOSITION		
DATE	Pl	LACE		CHARGE	DISPOSITION		
DATE	Pl	LACE		CHARGE	DISPOSITION		
DATE	P	LACE		CHARGE	DISPOSITION		
DATE	P	LACE		CHARGE	DISPOSITION		
DATE	Pl	LACE		CHARGE	DISPOSITION		
DATE	P		All V HISTOL		DISPOSITION		
DATE	P		AILY HISTOR		DISPOSITION		
DATE — Give the names of every		III – FAN		RY			
		III – FAN		RY			
– Give the names of every Brothers.	y member of you	III – FAN r immediate fa		R Y still living. Include Fa	ther, Mother, Sisters and		
– Give the names of every	y member of you	III – FAN		RY			
– Give the names of every Brothers.	y member of you	III – FAN r immediate fa		R Y still living. Include Fa	ther, Mother, Sisters and		
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– Give the names of every Brothers.	y member of you	III – FAN r immediate fa		R Y still living. Include Fa	ther, Mother, Sisters and		
– Give the names of every Brothers.	y member of you	III – FAN r immediate fa		R Y still living. Include Fa	ther, Mother, Sisters and		
– Give the names of every Brothers.	y member of you	III – FAN r immediate fa		R Y still living. Include Fa	ther, Mother, Sisters and		
– Give the names of every Brothers.	y member of you	III – FAN r immediate fa		R Y still living. Include Fa	ther, Mother, Sisters and		
– Give the names of every Brothers.	y member of you RELATI	III – FAN r immediate fa	mily who is	still living. Include Fa	ther, Mother, Sisters and		

 4 – Are you now or have you ever been a member of any subversive organization? 5 – Have you ever been connected or affiliated in any matter with or have you ever attended any meeting of any subversive organization? If yes, please describe the circumstances and reasons for attendance 							
IV – RESIDENCE							
1 – List a	ll addresses for th	ne last ten (10) years, starting	with present residence	first.			
FROM Mo. Y	r. Mo. Yr.	ADDRESS OF RESIDENCE	CITY AND STATE	FROM WHOM RENTED, INCLUDING ADDRESS			
		V –	WORK HISTORY				
2 – Are y	ou now or have y	ou ever been engaged in any l	business as an owner, ¡	partner, or corporate member?			
If yes	s, give details			satisfactory service?			
4 – Have your employers always treated you fairly?							
5 – Do yo 6 – Do yo 7 – Have 8 – Have	ou object to wear ou object to work you had experier you ever filed a c	ing a uniform?ing nights?nce with Shift Works?	ation?				
Give 	details if the ansv	•					
9 – Prov	ide complete care	eer/work history. Put your pre	sent employment first.				
Y		dress Employer					

	Name and Title of your Super	visor	Number Superv	rised			
	Reason for leaving		Salary per Annı	Salary per Annum			
В.	From to	Exact Title Position					
	Your name and Address Empl	oyer					
	Your duties						
	Name and Title of your Super	visor	Number Superv	ised			
	Reason for leaving		Salary per Annı	ım			
C.	From to	Exact Title Position					
	Your name and Address Empl	oyer					
	Your duties						
	Name and Title of your Super	visor	Number Superv	rised			
	Reason for leaving		Salary per Annı	ım			
D.	From to	Exact Title Position					
	Your name and Address Employer						
	Your duties						
	Name and Title of your Super	visor	Number Supervised				
	Reason for leaving		Salary per Annı	Salary per Annum			
E.	From to						
	Your name and Address Empl	oyer					
	Your duties						
		visor	•				
	Reason for leaving		Salary per Annı	Salary per Annum			
		VI – EDUCATION					
		VI EDUCATION					
NAME	S AND LOCATIONS OF SCHOOL	S	YEARS ATTENDED	YEAR GRADUATED			
L - CO	LLEGE						
2 – HI	GHSCHOOL/VOCATIONAL SCHO	OL					
3 - TR	ADE						
4 – If	Military Equivalent Certificate	obtained, set out date and name a	nd location of high school				
5 – It	·	e and locations of institutes, years	•				
•••							
	Mark and and and the state of t	difficult for a 2					
		difficult for you?					
/ – V	vnat school subject did you like	best?					
		VII – MILITARY SERVI	CE				
		ry or Naval organization of the Uni					
		· · · · · · · · · · · · · · · · · · ·					
3 – I1	you nave no military service, g	ive reasons					
•••							

	•					
	Vhat is your Service Number?					
	lighest Rank held?ighest Rank held? ist all Medals and Decorations awarded you	as a member of the Armed Forces				
		.)?				
9 – G	iive date and location of entrance to active d	luty				
	<u> </u>					
	Were you ever court-martialed in a grade of Explain on attached sheets.	military or naval court? Yes No				
		VIII – REFERENCES				
reput	•	loyers, fellow employees or school teachers) who are responsible adults of householders, property owners, business pr professional men or women,) years.				
Α. (Complete Name	Residence				
N	Number of Years Acquainted	Type of Business				
	Cell No					
В. С	Complete Name	Residence				
	·	Type of Business				
C	Cell No	Work No				
	•	Residence				
	·	Type of Business				
	E-mail					
(Cell No	Work No				
		CERTIFICATION				
Ph	Attach an unmounted full face photograph of yourself (2 ¾" x 2 ½"). otographs no more than 3 months old.	I certify that the foregoing answers are true and correct to the best of my knowledge and belief.				
	unless photograph and copies of certificates are furnished.	Signature of Applicant				

