APPLICATION FOR EMPLOYMENT

SHREWSBURY BOROUGH POLICE DEPARTMENT

	Last Name	First	Mid	ldle				
	Street Address	Street Address						
	City	County	State	Zip Code				
Appli	ication for position of:	Police Officer	SLEO II	Both				
	your current level of c	ertification or level o	f certification y	ou will receive if				
atteno	ding the Academy.	ertification or level o	_	ou will receive if				

PERSONAL DATA

	001111	
Date of birth:		
		this country?
How long have y	ou resided at your cur	rent address?
Telephone numb	er:	Cell number:
	order, state each and e ginning with your pres	every place in which you have lived during sent address.
From	То	Address (Street, City, State, Zip Code

SOCIAL STATUS

Law enforcement is a public service profession. Public confidence is a high priority. For this reason, the Shrewsbury Borough Police Department will conduct a confidential criminal check on your immediate family members.

N	Sarital status:					
	Single	Married	Divorced	Separated	Engaged	Widowed/Widower
	five the name of hildren. (If dece	•	,	aiden name)	, siblings, spo	ouse, ex-spouse and
	Name	Ad	dress	Phon	e (Home & C	Cell) Age
F	ather:				H- <u>C-</u>	
N	<u> fother:</u>					
<u>S</u>	ibling:					
<u>S</u>	ibling:					
<u>S</u>	ibling:					
<u>S</u>	ibling:					
<u>S</u>	pouse:					
<u>E</u>	x-Spouse:					
	ist the name(s) ears, if different			r(s) and ex-s	ignificant otl	her(s) for the past
_]	Name	Add	ress		one (Home/Cell)
<u>S</u>	ignificant Other	<u>:</u>			H- <u>C-</u>	
<u>E</u>	x-Significant O	ther:				<u> </u>
Е	x-Significant O	ther:				

NAME	DEPARTMENT
•	
List chronologically (number currently attending:	most recent dates first) all Police Academy(s) you hav
Class A Certificate	Alternate Route SLEO II SLEO I
Academy	
Address	
Certificate received or po	ending Date of Graduation
Class A Certificate	Alternate Route SLEO II SLEO I
Academy	
Address	
Certificate received or po	ending Date of Graduation
Class A Certificate	Alternate Route SLEO II SLEO I
Academy	

School		
Address		
Degree received/completed	Dates	GPA
School		
Address		
Degree received/completed	Dates	GPA
School		
Address		
Degree received/completed	Dates	GPA
Major T	Cotal credits earned toward do	egree
Please list all organizations, c school or college. Include the		vere involved with dur

It is understood I will immediately have transcripts from all high schools and colle to the Shrewsbury Borough Police Department. Yes No Proper fee must be forwarded to the school by the applicant. MILITARY SERVICE Have you ever served in an active military organization? Yes No Location Give Branch of Service: Military Specialty: Rank held: Service Serial Number: List all medals and decorations awarded to you as a member of the armed forces Were you ever court-martialed, tried on charges, or were you the subject of a court, desk court, captain's mast, company punishment, or any other disciplinary Yes: No: Number of times: If yes, give details of charges, agency concerned, dates and dispositions.	Date	School	Problems	Brief Explanation
MILITARY SERVICE Have you ever served in an active military organization? Yes No Location Give Branch of Service: Military Specialty: Rank held: Service Serial Number: List all medals and decorations awarded to you as a member of the armed forces Were you ever court-martialed, tried on charges, or were you the subject of a court, desk court, captain's mast, company punishment, or any other disciplinary Yes: No: Number of times:	to the Shr	estood I will imm ewsbury Boroug	nediately have transcrip gh Police Department.	ots from all high schools and colleg
Have you ever served in an active military organization? Yes No Location Give Branch of Service: Military Specialty: Rank held: Service Serial Number: List all medals and decorations awarded to you as a member of the armed forces Were you ever court-martialed, tried on charges, or were you the subject of a court, desk court, captain's mast, company punishment, or any other disciplinary Yes: No: Number of times:	Proper fee	e must be forwar	rded to the school by the	he applicant.
Yes No Location Give Branch of Service: Military Specialty: Rank held: Service Serial Number: List all medals and decorations awarded to you as a member of the armed forces Were you ever court-martialed, tried on charges, or were you the subject of a court, desk court, captain's mast, company punishment, or any other disciplinary Yes: No: Number of times:			MILITARY SER	RVICE
Give Branch of Service: Military Specialty: Rank held: Service Serial Number: List all medals and decorations awarded to you as a member of the armed forces Were you ever court-martialed, tried on charges, or were you the subject of a court, desk court, captain's mast, company punishment, or any other disciplinary Yes: No: Number of times:	Have you	ever served in a	n active military organ	nization?
Military Specialty:	Yes	No	Lo	cation
Rank held: Service Serial Number: List all medals and decorations awarded to you as a member of the armed forces Were you ever court-martialed, tried on charges, or were you the subject of a court, desk court, captain's mast, company punishment, or any other disciplinary Yes: No: Number of times:	Give Brar	nch of Service:_		
Service Serial Number: List all medals and decorations awarded to you as a member of the armed forces Were you ever court-martialed, tried on charges, or were you the subject of a court, desk court, captain's mast, company punishment, or any other disciplinary Yes: No: Number of times:	Military S	Specialty:		
Service Serial Number: List all medals and decorations awarded to you as a member of the armed forces Were you ever court-martialed, tried on charges, or were you the subject of a court, desk court, captain's mast, company punishment, or any other disciplinary Yes: No: Number of times:	Rank held	1:		
Were you ever court-martialed, tried on charges, or were you the subject of a court, desk court, captain's mast, company punishment, or any other disciplinary Yes: No: Number of times:				
Court, desk court, captain's mast, company punishment, or any other disciplinary Yes: No: Number of times:	List all m	edals and decora	ntions awarded to you	as a member of the armed forces:
If yes, give details of charges, agency concerned, dates and dispositions.	Yes:	No	: Nu	mber of times:
	If yes, giv	e details of char	ges, agency concerned	d, dates and dispositions.

Active or Inactive:	Brancl	h:
Rank:		ss:
From:		
	EMPLOYMENT	
the age of 18. Omit n	one. Give correct, full addr	l every place you were employ ess. Give dates of idleness
periods of employment	in proper sequence. Include	part-time employment.
Employer		
	Phone Number	
Address		•
Address From (mm/dd/yy)	Phone Number	•
Employer Address From (mm/dd/yy) Job Description Reason for leaving	Phone Number	
Address From (mm/dd/yy) Job Description	Phone Number	•
Address From (mm/dd/yy) Job Description	Phone Number	•
Address From (mm/dd/yy) Job Description Reason for leaving	Phone Number	•
Address From (mm/dd/yy) Job Description Reason for leaving Employer	Phone Number	•

Phone Number					
From (mm/dd/yy)	To (mm/dd/yy)		Immediate Supervisor		
Job Description					
Reason for leaving					
Are you now engaged member?	l in any business a	as an owner, a part	ener, a stockholder, or a c		
Yes:	No:	If yes, give	details:		
W 1'1.					
Were you ever discha Yes:	_	_	yment: times:		
Were you ever subjec			ection with any employm		
	110	11 / 03, give	douins.		

Yes:	No:	If ye	s, give details:	
	your spouse ever poss Yes:			
eity, state, or partnership of Yes:_	nse or permit (excluded federal agency ever be f which you or your symmetric No:_	peen denied to y pouse was an or	ou, your spouse	or to any corpo
city, state, or partnership o	federal agency ever by f which you or your symmetry. No:	peen denied to y pouse was an or	ou, your spouse	or to any corpo
eity, state, or partnership or Yes:_ If yes, give de Have you evrecommendat federal agence	federal agency ever by f which you or your symmetry. No:	ed for, served a	rou, your spouse fficer, revoked, constant as a character who or premises to a	itness for, or nany municipal,

agency	Date	Present Status
		Yes: No:
Do you have income	e from any other source?	
Do you have income	e from any other source?	Yes: No:
Do you have income	e from any other source?	Yes: No:
Do you have income	e from any other source?	Yes: No:
Do you have income	e from any other source?	Yes: No:
Do you have income	e from any other source?	Yes: No:
Do you have income	e from any other source?	Yes: No:
Do you have income If yes, give details: How much	How often	Yes: No:
Do you have income If yes, give details: Iow much	How often	Yes: No:
Do you have income If yes, give details:_ How much Do you own any rea	How often l estate? Yes: No	Yes: No:
Do you have income If yes, give details: Low much Do you own any rea	How often l estate? Yes: No	Yes: No: Source D: If yes, give details:

ARRESTS, SUMMONSES, ETC.

	No:	If yes, give detail	s:
Date	Violation	Location	Disposition
before any	municipal, state		requested, or otherwise required to committee, or other investigative by details:
			on of the fish and game laws?
Y es:	_ No:	If yes, give detail	S:
Date	Violation	Disposition	Police Agency Involved
Date	Violation	Disposition	Police Agency Involved
Have you e	ever been arreste		th a disorderly persons offense or m
Have you e	ever been arreste	ed for, or charged wit No: If	th a disorderly persons offense or m

Have y	ou ever had a criminal arrest record expun	nged? Yes:	No:
If yes, g	ve details:		
	ou ever been held as a material witness?		
If yes, g	ve details:		
any rea	ou ever been investigated by any law encon other than a law enforcement background	forcement or pound? Yes	rivate security ag No:
If yes, g	ve details:		
			n with this depart

SUBVERSIVE AFFILIATIONS

47.	Are you now, or have you ever been a member of any Communist, Communist-front, or other subversive organization, association, movement, or group, which advocates the overthrow of the constitutional form of government, or which seeks to alter the form of the government of the United States by unconstitutional or unlawful means? Yes:					
48.		ou now, or have you ever been, affiliated or associated with any of the organizations oups described in question 47? Yes: No:				
49.	relativ	ou now associating with, or have you ever associated with, any individuals, including ves, who you know or have reason to believe are, or have been members of any ization or group described in question 47?				
	Yes:_	No:				
50.	organ aidinį	Have you ever signed or solicited others to sign any petition sponsored or issued by any organization or group described in question 47, or any petition which has as its purpose the aiding of any person, cause, or program connected in any way with the organizations or groups described in question 47?				
	Yes:_	No:				
51.	Have	Have you ever participated in any of the following activities:				
	A.	Attendance, or participation in any parade, picket line, delegation, demonstration, affair, forum, or project sponsored or organized by any organization or group described in question 47? Yes: No:				
	В.	Payment or collection of any money, dues, contributions, or donations to any organization or group described in question 47? Yes: No:				
	C.	Sale or distribution of any written or printed matter prepared, reproduced, or published by any organization or group described in question 47? Yes: No:				
	D.	Purchased or subscribed to any publication or periodical prepared, reproduced, or published by any organization or group described in question 47 or by any of its agents?Yes No:				
52.	If you	answered yes to any of the above questions, give details:				

MOTOR VEHICLE HISTORY

Drivers License Number:	Expiration:		
Was your motor vehicle Yes: No:	registration or driver's license ever revoked or suspended?		
If yes, give details:			
Yes: No:	53 is yes, was such registration or driver's license ever restored? If yes, give details:		
Have you ever received a any other state, excluding	summons for any violation of the motor vehicle laws in this or parking violations?		
Yes: No:	If yes, give details:		
Do you possess a valid op	erator's license any other state?		
Yes: No:	If yes, give details:		
State	Expiration Date		
Number	Type		

OTHER INFORMATION

7.	Do you have any knowledge or information in addition to that specifically called for in the preceding questions which is or which may be relevant, directly or indirectly in connection with an investigation of your eligibility and fitness for this position, including but not limited to, knowledge or information concerning your character, temperance, habits, associations, criminal records, traffic violations, residence or otherwise?				
	Yes:	No:	If yes, give details:		

VOUCHERS

Upon completion of this form, the applicant must obtain three reputable citizens who will vouch for the honesty, reputation, and ability of the applicant. The voucher should read carefully all statements made by the applicant before signing. Then the voucher portion of the form should be completed by the voucher and signature affixed.

I, the undersigned, declare that I am over eighteen years of age that I have personally known the applicant for at least one year, that I have read the whole of the foregoing application and believe all the statements therein to be true. I am not related in any way to the applicant. I will, upon request, give further facts concerning the applicant as I may possess.

Name:				
Address:				
Telephone: (H)	(W)	Cell	Date of Birth:	
How long have you pe	ersonally know	n the applicar	nt:	
Is the applicant of goo	d character and	l reputation:_		
Signature:Date:				
Name:				
Address:				
Telephone: (H)	(W)	Cell	Date of Birth:	
How long have you personally known the applicant:				
Is the applicant of goo	d character and	l reputation:_		
Signature:			_Date:	

Name:				
Address:				
Telephone: (H)	(W)	Cell	Date of Birth:	
How long have you per	sonally know	n the applicar	nt:	
Is the applicant of good	character and	d reputation:_		
Signature:			Date:	
Name:				

NAME:

I hereby declare the information provided by me in this application is true and complete and I understand that falsification of this information is grounds for refusal to hire or, if hired, termination.

I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subject covered by this application and I release all such parties from all liability for any damage which may result from furnishing such information to you.

In consideration for my employment by the Borough of Shrewsbury, I agree to conform to the rules and regulations of the Borough of Shrewsbury and acknowledge these rules and regulations may be changed, interpreted, withdrawn or added to by the Borough of Shrewsbury at any time, at the Borough of Shrewsbury sole option as set forth in the Borough of Shrewsbury personnel policy or negotiated agreement with the Borough of Shrewsbury.

	NOTARIZATION	
	ned the foregoing statement and every question the	duly sworn, depose and say, am the nent. I have personally read and rein and I do solemnly swear that respect.
	Applicant	
Sworn to before me this	day of	, 20
	Notary Public Co	mmissioner of Deeds

My Commission Expires On

AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION

records concerning myself to any duly author	eby authorize a review of and full disclosure of all ized agent of the Borough of Shrewsbury Police n, whether the said records are of a public, private,
of education institutions: financial or credit inst commercial or retail credit agencies (including statements and records wherever filed; medic including hospitals, clinics, private practition employment and pre-employment records, in complaints or grievances filed by or against m	asent for full and complete disclosure of the records titutions, including records of loans, the records of credit reports and/or ratings); and other financial all and psychiatric treatment and/or consultation, oners, and the U.S. Veteran's Administration; including background reports, efficiency ratings, are and the records and recollections of attorney at the or another person in any case, either criminal or interest.
is developed directly or indirectly, in whole of considered in determining my suitability for er Department. I also certify that any person(s) v	a personal history background investigation which or in part, upon this release authorization will be imployment by the Borough of Shrewsbury Police who may furnish such information concerning menformation; and I do hereby release said person(s) d as a result of furnishing such information.
A photocopy of this release form will be var photocopy does not contain an original writing	lid as an original thereof, even though the said of my signature.
	Signature (include maiden name)
	Address
	Phone:
	DOB:SSN: