

Manchester Township Auxiliary Police

1 Colonial Drive Manchester, New Jersey 08759-3898 (732)657-2009

Please complete this application using pen only. Please print. * Any omissions or false statements made on this application will result in the applicant's immediate removal from the selection process.				
Date://	_			
Last Name:	Fiı	rst Name:	MI:	_
Date of Birth (Month/Day	/Year):/_	/		
Home Address:				
City:	State:	Zip	Code:	
Home Phone:	Ce	ell Phone:		
Work Phone:	Em	nail Address:		
How long have you reside	d at listed addre	ess? Own or	Rent (Circle one)	
Marital Status (Circle One): Married Sir	ngle Divorced	d Widowed Separated	
Place of Birth (City and Sta	ate):		U.S Citizen (Circle One): Y N	I
Social Security Number: _				
Height: Wei	ght:	_ Eye Color:	Hair Color:	
			Hair Color: nse Exp. Date:	
Driver's License Number:		Lice		
Driver's License Number: Has your license ever bee	n revoked or sus	Lice	nse Exp. Date:	— f license.
Driver's License Number: Has your license ever bee Do you possess any other	n revoked or sus	Licenspended (Circle	nse Exp. Date:e One): Y N *Attach copy o	— f license. ircle One)
Driver's License Number: Has your license ever bee Do you possess any other If yes, please describe the	n revoked or sus type of driver's type of license:	Lice spended (Circle license/ specia	nse Exp. Date:e One): Y N *Attach copy on the second of the second	f license. ircle One)
Driver's License Number: Has your license ever bee Do you possess any other If yes, please describe the	n revoked or sus type of driver's type of license: istered in your n	Lice spended (Circle license/ specia	nse Exp. Date:e One): Y N *Attach copy o	f license. ircle One)
Driver's License Number: Has your license ever bee Do you possess any other If yes, please describe the List all motor vehicles region drive, even if it is not regis	n revoked or sus type of driver's type of license: istered in your n stered to you?	License License Special	nse Exp. Date:e One): Y N *Attach copy o	— f license. ircle One) ————————————————————————————————————
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Driver's License Number: Has your license ever bee Do you possess any other If yes, please describe the List all motor vehicles region drive, even if it is not region Make: Plate #: Plate #:	n revoked or sus type of driver's type of license: istered in your n stered to you? Model: State: Model:	License Licenspended (Circle license special s	nse Exp. Date:e One): Y N *Attach copy of all endorsements? Yes or No (Copouses name (include the prime Year:	f license. ircle One) nary vehicle you



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Type of School	Name and Address of School	Course Major	Circle Last Completed Year	Indicated if Graduated (Circle Y or N)	List Degree
High School			9 10 11 12	ΥN	
Trade/Technical			1 2 3 4	Y N	
College			1 2 3 4	Y N	
Post Graduate			5 6 7 8	Y N	

Do you have any previous police or security experience? Y or N (Circle One) If yes, please explain.
Are you presently in the hiring process for any other police department or other agency? Yes or No
If yes, which department/agency?
Are you presently a member of any fire department or first aid squad? (Circle one or both)
If so, list the townships
Have you ever received a motor vehicle summons? Y or N (Circle One) If yes, please explain the type of each violation and list the date. *Have you ever been arrested for a traffic or parking warrant? <u>Violation:</u> <u>Date:</u>
Have you ever been arrested, indicted, or convicted of a crime other then a motor vehicle violation? Y or N (Circle One) If yes, please provide a brief detail of event and disposition of the case and list the date.
Have you ever served in the armed forces of the United States? Yes or No (Circle One)
If yes, what branch of service?



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Date of Service: From:	To:			
ype of Discharge:Job Specialty (MOS):				
Are you now serving in the active reserve? Yes or No (Circle One)				
Have you ever, by word of mouth, or in writing, advocated, advised, or taught the doctrine that the government of the United States of America, or of any state, or of any political sub division, thereof, should be overthrown or overturned by force, violence, or any unlawful means? Yes or No (Circle one) If yes, please explain in detail.				
Please List Two References 1 Name:				
1. Name:				
City:			-	
Relationship:	Home Phone:		-	
Cell Phone:	Email Address:			
2. Name:			-	
Address:			-	
City:	State:	Zip Code:	-	
Relationship:	Home Phone:		-	
Cell Phone:	Email Address: _			
Date:/				
Applicant Signature:				



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Do Not Write in this Area					
Applicant Contacted by:	(Officer/Badge #)	Date:/	<i>J</i>	Time:	
nterview Date:/		Officers Initials:			