

**Borough of Metuchen**

**AUXILIARY POLICE PERSONNEL INFORMATION APPLICATION**

MUNICIPALITY METUCHEN COUNTY MIDDLESEX DATE \_\_\_\_\_

(PLEASE PRINT)

NAME \_\_\_\_\_  
LAST FIRST M.I

DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_ CITIZEN O Y O N

PLACE OF BIRTH \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_ - \_\_\_\_ - \_\_\_\_ HOME TELEPHONE \_\_\_\_ - \_\_\_\_ - \_\_\_\_

RACE \_\_\_\_\_ COMPLEXION \_\_\_\_\_

HEIGHT \_\_\_\_ WEIGHT \_\_\_\_ EYES \_\_\_\_ HAIR \_\_\_\_

MARITAL STATUS: SINGLE O MARRIED O SEPERATED O DIVORCED O WIDOWED O

HOME ADDRESS \_\_\_\_\_  
CITY STATE ZIP CODE

PRESENT EMPLOYER \_\_\_\_\_  
NAME/COMPANY CITY STATE ZIP CODE

OCCUPATION \_\_\_\_\_ WORK TELEPHONE NUMBER \_\_\_\_ - \_\_\_\_ - \_\_\_\_

NORMAL WORKING HOURS \_\_\_\_\_

DO YOU HAVE ANY MEDICAL CONDITIONS THAT MIGHT IMPAIR YOU FROM  
PERFORMING SOME TASKS? (PLEASE  
LIST): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

HIGHEST LEVEL OF EDUCATION: HIGH SCHOOL O G.E.D O COLLEGE O  
OTHERO(PLEASE LIST AND INCLUDE SPECIAL SCHOOLS)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DO YOU HAVE ANY PREVIOUS POLICE EXPERIENCE?(PLEASE LIST WHAT KIND, WHERE, AND WHEN)**\_\_\_\_\_

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**DRIVER'S LICENSE NUMBER**\_\_\_\_\_

**ARE YOU LICENSED TO DRIVE? O YES O NO**

**HAVE YOU EVER BEEN ARRESTED, INDICTED OR CONVICTED OF A CRIME OTHER THAN A MOTOR VEHICLE VIOLATION? O YES O NO**

**IF YES, PROVIDE DETAILS OF EVENT, DATE AND DISPOSITION:**\_\_\_\_\_

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**PLEASE LIST TWO REFERENCES:**

**1.NAME**\_\_\_\_\_

**ADDRESS**\_\_\_\_\_

**TELEPHONE NUMBER**\_\_-\_\_-\_\_\_\_\_

**2.NAME**\_\_\_\_\_

**ADDRESS**\_\_\_\_\_

**TELEPHONE NUMBER**\_\_-\_\_-\_\_\_\_\_

**DATE**\_\_\_\_\_

**APPLICANT SIGNATURE**\_\_\_\_\_

## CONSENT AGREEMENT

BY SIGNING THIS AGREEMENT I HEREBY:

- 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.
- ALSO, AM AWARE THAT ANY MISREPRESENTATION OF ANY INFORMATION GIVEN BY ME WILL RESULT IN MY DISQUALIFICATION FROM THE METUCHEN AUXILIARY POLICE.

FUTUR:

I HEREBY AUTHORIZE/GIVE MY CONSENT FOR A BACKGROUND CHECK FOR THE PURPOSE OF APPOINTMENT TO THE METUCHEN POLICE AUXILIARY.

DATE \_\_\_\_\_ APPLICANT SIGNATURE ( IN INK) \_\_\_\_\_

PRINT NAME \_\_\_\_\_