



NEW HAVEN POLICE DEPARTMENT RESERVE APPLICATION FORM

1. Fill out the attached application completely
 2. Answer every question. If you do not know the answer or it does not apply, indicate so in the blank.
 3. Be sure to sign the application.
 4. Falsification of any information may be grounds for rejection of the application or termination from the reserve program at any time.
 5. Attach a legible copy of your driver's license to the application.
 6. Your application status will be confirmed by mail and instructions will be provided when necessary.
 7. Incomplete forms will be rejected and not considered for the program.
 8. You must be 21 years of age by the time of appointment to the program.
 9. If you have any questions, contact the Reserve Command at 748-7080.
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New Haven Police Reserves Application

APPLICANT INFORMATION			
Last Name		First	M.I.
Street Address			Apartment/Unit #
City		State	ZIP
Phone		E-mail Address	
Date Available		Social Security No.	
Position Applied for : Reserve Police Officer			
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
If no, are you authorized to work in the U.S.?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
If so, when?			
Have you ever been arrested?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
If yes, explain			

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/>	NO <input type="checkbox"/>
		Degree	
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/>	NO <input type="checkbox"/>
		Degree	
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/>	NO <input type="checkbox"/>
		Degree	

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

EMPLOYMENT HISTORY (LIST CURRENT EMPLOYMENT FIRST)

Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature	Date
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