



HOLLAND TOWNSHIP POLICE
IN
HUNTERDON COUNTY



61 Church Road, Milford, New Jersey 08848

POLICE DEPARTMENT
(908) 995-4670
FAX (908) 995-4612

JOHN D. HARRIS, JR.
Chief of Police

OFFICE OF EMERGENCY MANAGEMENT
(908) 995-9629
FAX (908) 995-4612

APPLICATION FOR POLICE OFFICER

Date: _____

This application is to be hand-printed by applicant. Complete and return to Chief of Police.

Name: _____ Sex: _____ Age: _____ Date of Birth: _____

Address: _____

Phone No: _____ Height: _____ Weight: _____ Hair: _____

Eyes: _____ Social Security Number: _____ Birth Place: _____

How long have you lived in New Jersey? _____

Do you possess a New Jersey Driver's License? _____ Number: _____

Military Service:

Veteran: Yes: No: Branch: _____

Rank When Discharged: _____ Type of Discharge: _____

Military Occupation: _____

Dates of Service: _____

Have you had firearms training? _____

What special training did you have in the service? _____

FOR INTERNAL USE ONLY

Education: Name and Location of School: From to Graduate? Major Course

High:

College:

Other:

References:

Name and Address

Phone No.

1.

2.

3.

4.

List all police training, if any:

List previous residences for the last ten (10) years. Start with present and list back, giving dates:



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Release Form

(Date)

To Whom It May Concern:

I, _____, the undersigned, am an applicant for the Holland Township Police Department. I understand that the above department will conduct a background investigation on my behalf. During the course of investigation, it will be necessary for them to my obtain medical, physical, scholastic, employment and police records.

I hereby give permission for any and all of the above records to be released to the Holland Township Police Department for the purpose so stated.

Signed: _____

Sworn and subscribed to before me this

_____ day of _____, _____.

-MUST BE NOTARIZED-