

**SOUTH PLAINFIELD POLICE DEPARTMENT  
COMMUNICATIONS OPERATOR APPLICATION**

**TO: CHIEF OF POLICE**

**Date:** \_\_\_\_\_

**FROM:** \_\_\_\_\_

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**1. APPLICANT INFORMATION:**

Social Security # \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Driver's license number: \_\_\_\_\_

A. Place of Birth: \_\_\_\_\_  
City State County

1. Birth Certificate attached ( ) Not attached ( )  
If not, explain \_\_\_\_\_

2. If naturalized: Papers attached ( ) Not attached ( )  
If not, explain \_\_\_\_\_

B. White ( ) Black ( ) Hispanic ( ) Other ( ) \_\_\_\_\_

**CITIZENSHIP**

2. Are you a native born or naturalized citizen? \_\_\_\_\_

If you are of foreign birth or a naturalized citizen, fill in the following:

Country of birth: \_\_\_\_\_

Port or place of departure to the United States: \_\_\_\_\_ Date: \_\_\_\_\_

How were you transported to the United States? (Ship, Plane, Train, etc.) \_\_\_\_\_

Name of transport conveyance and/or company you arrived on: \_\_\_\_\_

Port or place of entry into the United States \_\_\_\_\_ Date: \_\_\_\_\_

If you are a naturalized citizen, name and address of person who sponsored you on arrival:

\_\_\_\_\_

First address after arrival: \_\_\_\_\_

How did you obtain citizenship? (Give details) \_\_\_\_\_

Initials: \_\_\_\_\_

Petition # \_\_\_\_\_ Date \_\_\_\_\_ Court \_\_\_\_\_  
 State \_\_\_\_\_ Certificate # \_\_\_\_\_

**RESIDENCE**

3. Where do you now reside? \_\_\_\_\_  
 \_\_\_\_\_

Telephone number: ( ) \_\_\_\_\_  
 Area Code

4. How long have you resided there? \_\_\_\_\_

With whom do you reside? \_\_\_\_\_

Floor # \_\_\_\_\_ Apartment # \_\_\_\_\_

5. If you reside with someone other than spouse or parents, list:

Name	Date of Birth	Occupation	SS #
_____	_____	_____	_____
Place of Employment	Employers Address		
_____	_____		

6. In chronological order, list each and every place in which you have lived during the past ten (10) years, beginning with your present address:

FROM:	TO: MO/YR	ADDRESS (STREET/CITY/STATE/ZIP)

**SOCIAL STATUS**

7. Are you single, married, separated, divorced or widowed? \_\_\_\_\_

8. Give following information regarding marriage(s). List number of times married: \_\_\_\_\_

WHEN	WHERE	BY WHOM	Husband's name/Wife's Maiden name

Initials: \_\_\_\_\_

- 9. If separated, state reason: \_\_\_\_\_
- 10. If separated or divorced, give present address of that person: \_\_\_\_\_
- 11. How many times were you legally or voluntarily separated? \_\_\_\_\_
- 12. Were you ever divorced or had a marriage annulled? \_\_\_\_\_ How many times? \_\_\_\_\_
- 13. If ever **S**eparated, **A**nnulled or **D**ivorced, indicate which below and fill in required information:

S/A/D	Date Issued	Judge	Where issued(County/State)	Offending Party Reason/Decreed by Law

14. Were you ever the parent of any children (include deceased)? \_\_\_\_\_

15. List below every child born to you, (include & specify adopted & step-children):

Name	Date of Birth	Place of Birth	With Whom and Where does Child Reside

16. Are you now supporting all children born to you, including adopted and step-children? \_\_\_\_\_  
 If no, state full details: \_\_\_\_\_

17. Have you ever been involved as a plaintiff or defendant in a paternity proceeding? \_\_\_\_\_  
 If yes, state full details: \_\_\_\_\_

18. If single, list name of (at least one) girlfriend/boyfriend:

_____	_____	_____	_____	_____	_____
Name	Address	DOB	Occupation	SS#	Telephone #

19. List names of three (3) friends and/or associates other than Vouchers:

_____	_____	_____	_____	_____
Name	DOB	SS#	Telephone #	Duration of Association

_____	_____
Full Address	Occupation

_____	_____	_____	_____	_____
Name	DOB	SS#	Telephone #	Duration of Association

_____	_____
Full Address	Occupation

_____	_____	_____	_____	_____
Name	DOB	SS#	Telephone #	Duration of Association

Initials: \_\_\_\_\_

Full Address

Occupation

- 20. List names of Police Officers employed within the USA with whom you are socially/personally acquainted:

Name	Address (if known)	Department	Badge #

**EDUCATION**

- 21. List chronologically (earliest dates first) all schools, colleges & training courses you have attended.

School	Address		
From: Mo/Yr	To: Mo/Yr	Day/Evening	Last Grade or term

- 22. What college degree(s) or professional license(s) do you possess? \_\_\_\_\_

Majoring in \_\_\_\_\_ Grade point average (cumulative) \_\_\_\_\_

Total credits achieved towards degree: \_\_\_\_\_ Degree or Certification sought? \_\_\_\_\_

Degree or certification Received? \_\_\_\_\_ If not, why not? \_\_\_\_\_

- 23. Other than English, what language(s) do you speak? \_\_\_\_\_

Initials: \_\_\_\_\_

Understand? \_\_\_\_\_

- 24. List any problems with school (absenteeism, tardiness, poor grades, other discipline problems), include college.

Date	School	Problems	Explanation (Brief)

**MILITARY SERVICE**

- 25. Have you ever served in an Active military organization of the United States? \_\_\_\_\_

26. Give Branch of Service: \_\_\_\_\_ Military Specialty \_\_\_\_\_

27. Rank held: \_\_\_\_\_ Service Serial # \_\_\_\_\_

- 28. Have you ever served in a Reserve military organization or National Guard Unit? \_\_\_\_\_

If yes, what organization? \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Highest rank held? \_\_\_\_\_ Type of discharge received? \_\_\_\_\_

What was your military specialty? \_\_\_\_\_

- 29. How many discharges or separations from the service were given to you? \_\_\_\_\_

30. What is the type of your discharge(s) or separation(s)? (IE: Honorable, Dishonorable, Honorable Conditions, Medical, etc.) Be exact. \_\_\_\_\_

Reason: \_\_\_\_\_

- 31. Were you ever court-martialed, tried on charges, or the subject of a Summary Court, Deck Court, Captain’s Mast, Company Punishment, or any other disciplinary action? No ( ) Yes ( ) Number of times \_\_\_\_\_. If yes, list details of charges, agency concerned, dates and dispositions:

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Initials: \_\_\_\_\_



36. Were you ever discharged or asked to resign from employment? No ( ) Yes ( ) If yes, how many times?  
Give details of discharge or forced resignations below.

Employer	Employer's Address	Date	Supervisor	Reason for Leaving

37. Were you ever subjected to disciplinary action in connection with any employment? Yes ( ) No ( )  
If yes, give details \_\_\_\_\_

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

38. Have you, your spouse, or any corporation or partnership of which he/she was an officer, director or partner, ever possessed a license or permit (excluding driver's license or learner's permit) issued by any governmental agency? Yes ( ) No ( ) If yes, give details. \_\_\_\_\_

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

39. Have you or your spouse ever possessed a professional or occupational license, permit or certification? Yes ( ) No ( ) If yes, give details \_\_\_\_\_

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

40. Has any license or permit (excluding driver's license or learner's permit) issued by any city, state or federal agency ever been revoked, canceled, suspended or denied to you, your spouse or to any corporation or partnership of which you or your spouse was an officer, director or partner? Yes ( ) No ( )  
If yes, give details \_\_\_\_\_

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

41. Have you ever sponsored, vouched for, served as character witness for, or made any recommendations for or concerning any person or premises to any municipal, state or federal agency in connection with the issuance, revocation or suspension of any license or permit or for any other reason? Yes ( ) No ( )  
If yes, give details \_\_\_\_\_

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

Initials: \_\_\_\_\_

42. Have you ever been rejected by another police department for employment? Yes ( ) No ( ) If yes, list all below.

When	Where	Reason

43. Were you ever a member of a social, labor or fraternal organization? Yes ( ) No ( )  
If yes, list below every such organization.

From	To	Name of Organization	Address	Type of Organization

44. Are you currently on an employment list, or have you taken any tests for potential employment with any law enforcement agency? Yes ( ) No ( ) If yes, what agency? When? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

45. Have you ever received unemployment insurance or other federal, state or local benefits or assistance? Yes ( ) No ( )

If yes, give details as to when, from whom, what kind, and for how long: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

46. Have you ever received any public assistance to which you were not entitled? Yes ( ) No ( )

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

**GENERAL**

47. Do you consume any alcoholic beverage? Yes ( ) No ( ) If yes, how frequently? \_\_\_\_\_

Quantity? \_\_\_\_\_ How would you describe your use of alcoholic beverages? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Initials: \_\_\_\_\_

**ARRESTS, SUMMONSES, ETC.**

48. Have you ever been arrested for or charged with Juvenile Delinquency? Yes ( ) No ( )  
If yes, list all offenses and give information below:

Date	Age	Violation	Location	Court disposition	Police Agency Concerned

49. Have you ever been summoned, subpoenaed, requested or otherwise required to testify before any Municipal, State or Federal agency, committee or other investigative body? Yes ( ) No ( )  
If yes, give details \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

50. Have you ever received a summons for any violation of the Fish and Game Laws? Yes ( ) No ( )  
If yes, list all & give information below.

Date	Violation	Location	Disposition	Age	Police Agency concerned

51. Have you ever been arrested for, or charged with, a violation of the disorderly persons act or city ordinance?  
Yes ( ) No ( ) If yes, list all & give information below.

Date	Violation	Location	Disposition	Age	Police Agency concerned

52. Have you ever been arrested, indicted or convicted for any violation of the Criminal Law?  
Yes ( ) No ( ) If yes, list all & give information below.

Date	Violation	Location	Disposition	Age	Police Agency concerned

Initials: \_\_\_\_\_

53. Have you ever had a criminal or arrest record expunged? Yes ( ) No ( ) If yes, give complete details:

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

54. Have you ever been held as a material witness? Yes ( ) No ( ) If yes, list all & give information below.

Date	Violation	Location	Disposition	Age	Police Agency concerned
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

55. Have you ever been held as a suspicious person or investigated by any law enforcement or private security agency for any reason? Yes ( ) No ( ) If yes, give information below.

Date	Violation	Location	Disposition	Age	Police Agency concerned
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

56. Have you ever been fingerprinted? (Exclude only present application with this department)  
Yes ( ) No ( ) If yes, give information below.

When	Where	Purpose
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Initials: \_\_\_\_\_

***SUBVERSIVE AFFILIATIONS***

57. Are you now, or have you ever been, a member of any subversive organization, association, movement or group which advocates the overthrow of our constitutional form of government, or which seeks to alter the form of the government of the United States by unconstitutional or unlawful means? Yes ( ) No ( )
58. Are you now, or have you ever been, affiliated or associated with any of the organizations or groups described in Question #57? Yes ( ) No ( )
59. Are you now associating with, or have you ever associated with, any individuals including relatives, who you know or have reason to believe are, or have been, members or any organization or groups described in Question #57? Yes ( ) No ( )
60. Have you ever signed or solicited others to sign any petition sponsored or issued by any organization or group described in Question #57, or any petition which has as its purpose the aiding of any person, cause or program connected in any way with organizations or groups described in Question #57? Yes ( ) No ( )
61. 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 #57? Yes ( ) No ( )
- B) Payment or collection of any money, dues, contributions, or donations to any organization or group described in Question #57? Yes ( ) No ( )
- C) Sale or distribution of any written or printed matter prepared, reproduced, or published by a group or organization described in Question #57 or by any of its agents? Yes ( ) No ( )
- D) Purchased or subscribed to any publication or periodical prepared, reproduced or published by a group or organization described in Question #57 or any of its agents? Yes ( ) No ( )
62. If your answer is **YES** to any of the above questions, explain. \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Initials: \_\_\_\_\_

**MOTOR VEHICLE HISTORY**

63. Have you ever received a summons for violation of the Motor Vehicle Laws in this or any other state? (Exclude overtime parking violations) Yes ( ) No ( ). If yes, list all and give information below.

Date	Offense	Location	Court Disposition	Age	Police Agency Concerned

64. Was your Motor Vehicle Registration certificate, Driver’s or other vehicle operator’s license ever revoked? Yes ( ) No ( ). Suspended? Yes ( ) No ( ) If yes, list all.

When? \_\_\_\_\_ Where? \_\_\_\_\_

Reason: \_\_\_\_\_

65. Was your Registration Certificate or Driver’s license ever restored? Yes ( ) No ( )

If yes, which one? \_\_\_\_\_ When? \_\_\_\_\_ Where? \_\_\_\_\_

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**VOUCHERS**

Upon completion of this form, the applicant must obtain three (3) reputable citizens who will vouch for the honesty, reputation and ability of the applicant. (NOT TO BE SWORN MEMBERS OF THIS DEPARTMENT OR PERSONS LISTED IN ANY OTHER SECTION OF THIS APPLICATION). ALL INFORMATION WILL BE TREATED AS CONFIDENTIAL. 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.

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Initials: \_\_\_\_\_

**VOUCHER #1**

(please print)

I, the undersigned, declare that I am over eighteen (18) years of age, that I have personally known the applicant for at least one (1) 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 \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ Social Security # (optional) \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Telephone # \_\_\_\_\_

Occupation \_\_\_\_\_ Business Address \_\_\_\_\_

How long have you known applicant? \_\_\_\_\_ Is applicant of good character and reputation? \_\_\_\_\_

Signature \_\_\_\_\_ Present Date \_\_\_\_\_

**VOUCHER #2**

(please print)

I, the undersigned, declare that I am over eighteen (18) years of age, that I have personally known the applicant for at least one (1) 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 \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ Social Security # (optional) \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Telephone # \_\_\_\_\_

Occupation \_\_\_\_\_ Business Address \_\_\_\_\_

How long have you known applicant? \_\_\_\_\_ Is applicant of good character and reputation? \_\_\_\_\_

Signature \_\_\_\_\_ Present Date \_\_\_\_\_

**VOUCHER #3**

(please print)

I, the undersigned, declare that I am over eighteen (18) years of age, that I have personally known the applicant for at least one (1) 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 \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ Social Security # (optional) \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Telephone # \_\_\_\_\_

Occupation \_\_\_\_\_ Business Address \_\_\_\_\_

How long have you known applicant? \_\_\_\_\_ Is applicant of good character and reputation? \_\_\_\_\_

Signature \_\_\_\_\_ Present Date \_\_\_\_\_

Initials: \_\_\_\_\_

