

CITY OF LAWRENCE, MASSACHUSETTS

APPLICATION FOR AUXILIARY POLICE OFFICER

Answer each question completely and print clearly your answers in ink.

Part 1: Your information:

Name: _____
(last) (m.i.) (first)

Social Security Number: _____

Address: _____ City: _____ State: _____

Date of Birth: month: _____ day: _____ year: _____

Are you a U.S. Citizen: () Yes () No Your sex: () male () female

Mother's First Name: _____ Father's First Name: _____

Where were you born?: (city, state, country?) _____

Driver's License Number: _____ State: _____ Expires: _____

Hone Phone Number: _____ Cell Phone: _____

Work Phone: _____ e-mail address: _____

Height: _____ Weight: _____ Completion: _____ Eye Color: _____

Hair Color: _____ Build: _____

Who is you closest relative? _____ Relationship: _____

Address: _____ Phone Number: _____

If any emergency was to develop, who should we contact? _____

Relationship: _____ Address: _____ Number: _____

Do you possess a FID Card or a Permit to Carry a Handgun? () No () Yes – if yes explain below:

City: _____ State: _____ Type: _____ Reason: _____

Do you have any incapacities of sight, hearing, speech or any mental illness or physical disabilities that would prevent you from performing the duties of a police officer: () No () Yes – describe below:

Read the following statement before you answer the following question:

You are not required to disclose the details of any offenses committed prior to your seventeenth birthday. You are not required to disclose the details of any conviction(s) more than five (5) years prior to the date of this application for any of the following offenses: drunkenness, simple assault, speeding, minor traffic violations, affray, or disturbance of the peace. You are not required to disclose the contents of any court record that has been sealed. If you have a court record which has been pardoned, a copy of said pardon must be attached to this application. If you have ever been convicted of any offenses against the law or are now under any charges for any criminal offense, you must state the case in the space below unless it is excluded from the above.

Have you ever been convicted of any offenses against the law, or are you now under any charges for any offenses of the law in this state or any other state? () No () Yes if yes, complete below:

(date)	(court)	(offense)	(disposition)

Which of the following best describes you: _____

- (1) White (2) Black (3) Hispanic (4) Asian (5) American Indian (6) Cape Verdean

Have you ever served in the Armed Forces of the United States: () No () Yes explain below:

Branch: _____ Dates: _____ Discharge: _____

Are you currently still enlisted? () Yes () No

Are you a resident of Lawrence Massachusetts? () Yes () No

Have you ever applied to any auxiliary police force in the state in the past three (3) years? () No () Yes

If so, list which departments: _____

Have you ever been an auxiliary officer in any force in the state in the past five (5) years? () No () Yes

If so, list which department(s): _____

Have you ever been or applied to be an auxiliary officer for Lawrence before? () No () Yes

If so please give dates: _____

Part 2: Your Education:

Education: (list High Schools, Trade Schools, Colleges, etc.)

Name of School	Years Attended	Course/Degree

Have you ever has any previous law enforcement experience of courses? (___) No (___) Yes, explain below:

(Course)

(Location)

(dates)

Part 3: Your Employment:

Where are you currently employed?

Company:_____ Address:_____

Telephone Number:_____ Supervisor:_____

Job title/position:_____ How long have you worked here:_____

What is you current work schedule?: (days, night, hours, weekends,)

List your last three (if applicable) employers:

(company)

(address)

(dates)

(reason for leaving)

Part 4: Your References:

Please list three references. Please do not list relatives or anyone residing in your household.

(name)

(address)

(position)

(telephone #)

Part 5: Your Signature and consent:

I hereby declare that the statements and answers made as part of this application are true and made under the penalties of perjury:

Signature:_____

Date:_____

CITY OF LAWRENCE, MASSACHUSETTS

Authority for Release of Information

I, _____ born at _____
On _____, having filed an application for the position of an Auxiliary Police Officer in the City of Lawrence, consent to have an investigation made as to my moral character, reputation and witness for the position to which I have applied and such information may be received, reported to the Lawrence Police Department. I agree to give any further information which may be required in reference of my past record.

I also authorize and request of every person, firm, company, corporation, governmental agency, court, association or institution having control of any documents, records, and other information pertaining to me, to furnish to the Lawrence Police Department any such information, including documents, records, files, etc. regarding charges or complaints files against me, formal or informal, pending or closed, or any other pertinent data, and to permit the Lawrence Police Department, the Lawrence Auxiliary Police Bureau or any such of it's agents or representatives to inspect and make copies of such documents, records, and other information.

Specifically, I hereby authorize the release of any date or record on file with the Massachusetts Board of Probation to the Lawrence Police Department .

I hereby release, discharge, and exonerate the Lawrence Police Department, the Lawrence Auxiliary Police Bureau, the City of Lawrence, it's agents and representatives, and any person so furnishing or inspection of such documents, records, files, and other information or the investigations made by or in behalf of the Lawrence Police Department.

This authority shall continue and remain in force until it is revoked by the undersigned.

Print Name: _____
(last) (m.i.) (first)

Signature: _____ Date: _____

Address: _____

City/Town, State: _____



LAWRENCE POLICE DEPARTMENT

APPLICATION FOR AUXILIARY POLICE OFFICER

To apply for the position of an Auxiliary Police Officer, you must:

- (1) Have a High School Diploma or G.E.D
- (2) Have a Valid Driver's License
- (3) Have a clean criminal Background
- (4) Must be 21 Years of Age
- (5) Reside in 25 miles of Lawrence

Fill out the attached three (3) pages and return by mail to:

Auxiliary Chief J.L. Jackson
Office of the Chief
Lawrence Police Department
90 Lowell Street
Lawrence, Massachusetts 01841

