BERLIN POLICE DEPARTMENT FORMAL EMPLOYMENT APPLICATION



Reference must not be a Sworn Member of this department, or persons who are already listed in any other section of this application.

Applicant must obtain three reputable citizens (no relatives) who will vouch for the honesty, reputation and ability of this applicant.

PERSONAL REFERENCE #1

I, the undersigned, declare that I am over eighteen years of age, that I have personally known the applicant for at least one 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.

ALL INFORMATION WILL BE TREATED AS CONFIDENTIAL

(PLEASE PRINT OR TYPE)		
Name:	Business Address:	
Home Address:	Business City/State/Zip	
Home City:	Business Telephone #:	
Home State/Zip:	Occupation/Title:	
Home Telephone #:	How long have you personally known the applicant?	
Your Date of Birth:	Is the applicant of good character and reputation?	
Your Social Security Number:		
Reference Signature:	Date:	

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PERSONAL REFERENCE #2

I, the undersigned, declare that I am over eighteen years of age, that I have personally known the applicant for at least one 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.

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ALL INFORMATION WILL BE TREATED AS CONFIDENTIAL

(PLEASE PRINT OR TYPE)	
Name:	Business Address:
Home Address:	Business City/State/Zip
Home City:	Business Telephone #:
Home State/Zip:	Occupation/Title:
Home Telephone #:	How long have you personally known the applicant?
Your Date of Birth:	Is the applicant of good character and reputation?
Your Social Security Number:	
Reference Signature:	Date:

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PERSONAL REFERENCE #3

I, the undersigned, declare that I am over eighteen years of age, that I have personally known the applicant for at least one 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.

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ALL INFORMATION WILL BE TREATED AS CONFIDENTIAL

ALL IN CHINATION WILL BE TREATED AS CONTIDENTIAL		
(PLEASE PRINT OR TYPE)		
Name:	Business Address:	
Home Address:	Business City/State/Zip	
Home City:	Business Telephone #:	
Home State/Zip:	Occupation/Title:	
Home Telephone #:	How long have you personally known the applicant?	
Your Date of Birth:	Is the applicant of good character and reputation?	
Your Social Security Number:		
Reference Signature:	Date:	