

APPLICANT REFERENCE REQUEST

Reference for _____, who is seeking to volunteer as an

NAME OF APPLICANT

Auxiliary Officer with the ***Middletown Township Police Department.***

I, the above-named ***applicant*** requests that _____

REFERENCE'S NAME

serves as a personal reference and provides this completed reference form to the ***Middletown Township Police Department.*** I request and authorize you to provide the required information when completing this form and to respond truthfully in completing the following form, even if that information may unfavorably affect my application the employing agency will evaluate my suitability for the position I am applying for.

Signature of Applicant

Date: _____

TO THE VOUCHER:

As a voucher, you must respond fully and truthfully to the answers you provide below and to any other information you provide about the ***applicant*** who seeks employment with this law enforcement agency.

The voucher should read carefully and respond truthfully to all questions and to all statements provided before signing this reference form. All information provided must be the personal knowledge of the voucher.

I, the undersigned person declare that ***I am over eighteen (18) years of age***, that I have ***personally known the applicant for at least three years*** and that I have read all the statements and information provided herein and certify that they are true to the best of my knowledge. ***I am not related in any way to the applicant***, and I will, upon request, give further facts concerning the ***applicant***. ***I understand that my response will be considered "confidential" and will not be provided to the applicant.***

(PLEASE TYPE OR PRINT BY HAND ALL RESPONSES REQUIRED BELOW)

VOUCHER:

Name: _____ Soc. Security No. _____

Home Address: _____

Phone: (____) _____ Business & Address: _____

Phone: (____) _____ Occupation _____

How long have you personally known the *applicant*? _____

In your opinion would the *applicant* make a good Police Officer? __

If you were in danger, would you want the *applicant* to be the officer helping you? _____ Why?

In your opinion, would most people who know the *applicant* agree with your assessment?

What do you believe are significant attributes of the applicant? _____

In your opinion, what deficiencies should the *applicant* work to improve upon and how would those improvements help the applicant to be a successful Police Officer? _____

Do you personally know of any reason the ***applicant*** should not be accepted as a law enforcement officer?_____. ***If the answer is yes, please insert information on a separate sheet of paper and attach it at the end of this form.***

On a scale from one to ten, where would you place the ***applicant*** as an individual who has the character, qualities, personality and mental abilities necessary to be a respected and successful law enforcement officer? _____

On a scale from one to ten, where do you place your level of comfort and willingness to serve as a reference for this ***applicant***, knowing that this agency will give significant weight to your responses in determining whether or not to employ this applicant as a law enforcement officer with our department?_____

Signature

Date

PLEASE MAIL THIS FORM DIRECTLY TO:

**R. Craig Weber, Chief of Police
Middletown Township Police Department
One King's Highway
Middletown, NJ 07748
Attention:
(Police Administration)**

IF VOUCHER HAS ANY QUESTIONS-CALL (732) 615-2039