

1. Full legal name: _

Georgetown Police Department

335 N. Race Street, Georgetown, DE, 19947 PH: 302-856-6613 FX: 302-856-7374 Chief R. L. Hughes II

POLICE OFFICER APPLICATION

	First	Middle	Last
2.	. Give any other names you have used or have been	known by:	
3.	. Address:		
4.	. Telephone Numbers: (Work)	(Home)	
5.	. Date of Birth:		
6.	. Are you a citizen of the United States?	Natural Born	
7.	. Naturalized? (If so, date and location)		
8.	,		
9.		at?	
10.	Have you ever been certified as a police officer in any other jurisdiction?		
	If yes, state: The dates I	Name of Agen	су
11.	1. Do you possess a valid Delaware Driver's License? _		D/L #
12. Do you possess a valid Driver's License from another sta			
	If so, fill in the state and license number _		
13.	3. Is your visual acuity 20/200 or better uncorrected?		
14.	4. Have you ever been convicted of a felony or a dom	estic violence	misdemeanor?
un	hereby certify that all statements made in thinderstand that any misstatements of material lismissal.		
The to psy cla suc dis	the undersigned hereby grants to the Georgetown of contact any police or military organization, any esychiatrist, psychologist, licensed clinical social was larify, or further explain any information contained uch information shall remain strictly confidential a liscussed with any person or entity not directly consition I have applied for.	Police Depa present or fo vorker, or ot d herein. It and may not	ormer employer, and any doctor, ner licensed counselor to verify, s understood and agreed that all be released, shared, disclosed, or
		Applicant S	gnature Date