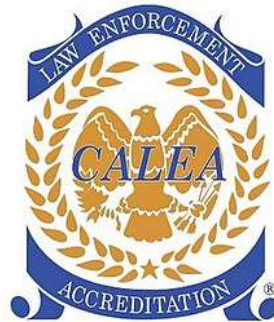


# Schererville Police Department

## Police Applicant



### Personal Data

Name: \_\_\_\_\_  
Last First Middle (Maiden)

Address: \_\_\_\_\_  
Street Apt#

\_\_\_\_\_ City State Zip Code

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

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Have you completed a certified Police Academy:  Yes  No

If so, which Academy? \_\_\_\_\_

What State? \_\_\_\_\_

Current Employer: \_\_\_\_\_