Application for Volunteer Fire Department
Township of Wyckoff

Complete all questions below, do not write in the "Official Use Only" area. Bring this application along with your unsigned mental health for to the police department when you get finger printed.

You must phone the police department to make an appointment to have your fingerprints taken. Wyckoff Police Department -- 201-891-2121.

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Applicant:_____
Last Name: First Name: Middle Name:
Address:_____
Date Of Application:_____ Phone Number:_____
Occupation:_____
Employer & Employers Address:_____
_____
Social Security Number:_____ Date Of Birth:_____
Drivers License Number:_____ Drivers License State:_____
Age:_____ Sex:_____ Race:_____ Build:_____ Height:_____ Weight:_____
Eyes:_____ Hair:_____ Glasses:_____ Citizen:_____
Complexion:_____ Citizen:_____ Marital Status:_____ Birth Place:_____
Nearest Relative, Name & Address:_____
_____
Distinguishing Physical Characteristics:_____
Scars, Marks, Amputations:_____
Address for the last ten years:_____
_____

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Official use only - Do Not Write Below This Line

Wyckoff Police Blotter Number:_____ In House Computer Check:_____
NCIC Results:_____
SCIC Results:_____
Mars Results:_____
Drivers License Results:_____ Driver History Attached:_____
Fingerprints Mailed to State On:_____ Mental Health Mailed On:_____
Investigating Officer:_____
Date completed application placed in Fire Chiefs Mail Box:_____