



NOBLESVILLE POLICE DEPARTMENT CRIME WATCH COORDINATOR

Application

Name: _____ Sex: Male Female
Last First Middle

Address: _____
(Street) (City) (State) (Zip Code)

Are you 18 or older? _____ Social Security Number: _____

Previous Names: _____
(Include maiden names, previous married names, and aliases)

Home Phone #: (____) _____ Cell phone #: (____) _____

Present or Most Recent Occupation: _____

Email Address: _____

Education: List education received beginning with high school.

Name of School	Location of School	Degree or Units Completed

Employment: List work history for past 2 Employers if within 5 Years.

Employer	Title or Position
Address	Date of Employment
Employer	Title or Position
Address	Date of Employment

Criminal History:

Have you ever been convicted of a felony? Yes No

Have you ever been convicted of a misdemeanor? Yes No

If yes, provide the following information:

Date	Charge(s)	Police Agency	Disposition/Penalty

Additional Comments, or Continuation of Information Listed Above:

Authorization for release of records:

I, _____, hereby authorize the Noblesville Police Department to request of any law enforcement agency or former employer to release all information (including, but not limited to, traffic violation(s), conviction(s), and pending criminal charge(s) to the Noblesville Police Department, or its representative, that may be sought in connection with this department for crime watch services with the Noblesville Police Department.

(Signature)

Thank you...

We appreciate the time you took to complete this application and we will contact you in the near future regarding this application.

Please return completed application to:

Noblesville Police Department
Crime Watch Program 135 S 9 th Street Noblesville, IN 46060

For NPD Use Only:

Date Received: _____

IDACS Check: _____

In-House Check: _____

ID card Issued: _____

III Checked: _____