Preliminary Application

Redding Police Department

96 Hill Road
Redding, CT 06896

Personal Information

Name _____
Last **First** **Middle**

Address _____
 # Street **Apartment**

_____
City **State** **Zip**

Phone **(_____)_____** **Position Applied For**_____

Email Address:_____

>>ALL TESTING NOTIFICATIONS WILL BE DONE BY EMAIL<<

Work Experience **(begin with most recent)**

Employer	Address	Phone	Employment dates

Education

	Name	City, State	Degree Received	Date
High School				
College				
Post Graduate				

I hereby certify that the answers given by me to the previous questions in this application are in full and true to the best of my knowledge and belief. I understand that any false information, omissions, or misrepresentation of the facts in this application or during any phase of the testing process may be cause for rejection of my application or discharge at any time during my employment.

Signature of Applicant_____**Date**_____

Completed applications must be returned to:
No Later than March 15, 2012

Chief of Police
Redding Police Department
96 Hill Road
Redding, Connecticut 06896

The Town of Redding is an Equal Opportunity Employer.
Minorities & Women are strongly encouraged to apply