

2400 Byberry Road • Bensalem, PA 19020 • (215) 633-3700 • Fax (215) 633-3656

Frederick A. Harran Director of Public Safety



# Police Explorers



Application for Membership

Applicant Information						
Name:						
Date of Birth:		SSN#:				
Address:						
Home Phone:		Cell Phone:				
Email:						
Are you a student?	Grade:	School:				
Languages Spoken:						
Drivers Information						
Driver's License Number:	,		State:			
Do you own a vehicle?		Make:				
Model:		Year:				
I give my permission to the Bensalem Police Department to examine any and all criminal and motor vehicle records. The results of this investigation may impact my acceptance into the Town Watch organization. If accepted into this organization, I will consent to providing my contact information to the local Town Watch leader. I understand that participation in this program in contingent on remaining a law-biding citizen.						
Signature:						
Date:						
DO NOT WRITE BELOW THIS LINE						
Remarks:						
Town Watch Group:						
Authorized Signature:			Date:			
Printed Name:			Title:			



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# **Family Information**

Mothers Name:						
Street Address:						
City:	State:		Zip Code:			
Home Phone:		Cell Phone:				
Work Phone:		Other Phone:				
Fathers Name:						
Street Address:						
City:	State:		Zip Code:			
Home Phone:	ome Phone:		Cell Phone:			
Work Phone:		Other Phone:				
Guardians Name:						
Street Address:						
City:	State:		Zip Code:			
Home Phone:		Cell Phone:				
Work Phone:		Other Phone:				
List Names and Ages of Brothers / Sisters						
Name:		Age:				
Name:		Age:				
Name:		Age:				
Name:		Age:				
Name:		Age:				
Name:		Age:				
Name:		Age:				



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# **Education Information**

Grammar School:				
Junior High School:				
Senior High School:				
College:				
Other:				
Have you ever been suspended from school?				
If so, reason for suspension?				
What are your educational goals?				
What organized sports, groups or clubs are you involved in?				
Are you, or have you ever been involved in community service work?				
The you, of have you ever been involved in community service work.				



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# **Employment Information**

Place of Employment:					
Phone Number(s):					
Street Address:					
City:	State:	Zip Code:			
Positions held:					
May we contact your employer?					
If no, state reason:					
Have you ever been arrested?					
If yes, explain:					
Have you ever received any traffic citations?					
If yes, explain:					
Do you use narcotic drugs?					
Do you use alcohol?					