

WILMETTE POLICE DEPARTMENT
Wilmette, IL

APPLICATION FOR CERTIFICATE OF REGISTRATION

Applications shall be submitted with two photographs of the applicant taken within thirty (30) days immediately prior to the date of filing the application, which photographs shall be 1" x 1 1/2" in size showing the head and shoulders of the applicant in a clear and distinguishing manner.

Date: _____ Incident No: _____

Certificate No: A _____

PRINT or TYPE all information – DO NOT WRITE (Office Use Only Above This Line)

APPLICANT INFORMATION:

Full Name of Applicant: _____
(last name) (first name) (middle initial)

SEX _____ RACE _____ DATE OF BIRTH _____ WEIGHT _____ HEIGHT _____

HAIR _____ EYES _____ PLACE OF BIRTH _____
(city) (state)

COMPLEXION _____ BUILD _____ DO YOU WEAR GLASSES? _____

SOC. SECURITY # _____ DRIVERS LIC. # _____
(number) (state)

LEGAL ADDRESS _____
(number) (street) (city) (state) (zip code)

HOW LONG AT THIS ADDRESS _____ RESIDENCE PHONE # _____
(yrs) (mos) (area code) (number)

EMPLOYER AND EMPLOYMENT INFORMATION:

NAME OF COMPANY OR FIRM REPRESENTED _____

ADDRESS OF FIRM _____
(number) (street) (city) (state) (zip code)

FIRM PHONE # _____

HOW LONG HAVE YOU WORKED FOR THIS FIRM? _____

Within the past 5 years, has a CERTIFICATE OF REGISTRATION BEEN ISSUED to you under this ordinance? _____ If yes, give the approximate date of the last application. _____

Within the past 5 years, has a CERTIFICATE OF REGISTRATION issued to you under this ordinance been revoked? _____

Within the past 5 years, have you been convicted of a violation of any of the provisions of this ordinance, or similar ordinance of any other Illinois municipality regulating soliciting? _____ If yes, specify municipality _____ and approximate date. _____

Within the past 5 years, have you been convicted of a felony in Illinois or any other State? _____ If yes, specify the charge, State, disposition, and the date of disposition _____

I do solemnly swear or affirm that the above information is true and correct. I understand that any false information will result in the rejection of the application and/or revocation of any CERTIFICATE OF REGISTRATION that may have been issued and will disqualify me from soliciting within the Village of Wilmette of Wilmette, Illinois.

(signature of applicant) (date)

(Office Use ONLY below this line)

Application approval:

LEADS NCIC PIMS CQE

(Official checking background) (date)

Chief of Police Date