



ILLINOIS STATE POLICE MERIT BOARD
OFFICIAL AFFIDAVIT

I, _____ (PLEASE PRINT) DO SWEAR BY MY SIGNATURE BELOW THAT I HAVE AT LEAST (mark the appropriate box):

- THREE (3) YEARS OF CONTINUOUS FULL TIME SERVICE AS A POLICE OFFICER WITH THE POLICE AGENCY LISTED BELOW

- THREE (3) YEARS OF CONTINUOUS FULL TIME ACTIVE DUTY OF MILITARY SERVICE IN THE BRANCH LISTED BELOW

NAME OF POLICE AGENCY _____
OR MILITARY BRANCH _____ (PLEASE PRINT)

ADDRESS: _____ (PLEASE PRINT)

_____ (PLEASE PRINT)

BEGINNING DATE OF EMPLOYMENT OR SERVICE: _____

ENDING DATE OF EMPLOYMENT OR SERVICE: _____

I UNDERSTAND THAT IF ANY OF THE ABOVE INFORMATION IS PROVEN TO BE INCORRECT AT ANYTIME DURING THE COURSE OF THE MERIT BOARD'S RECRUITMENT/SELECTION PROCESSES, IT WILL RESULT IN **IMMEDIATE REMOVAL** FROM THE RECRUITMENT/SELECTION PROCESS.

YOUR SIGNATURE

DATE

THIS FORM MUST BE RECEIVED ALONG WITH YOUR APPLICATION BY THE APPLICATION DEADLINE

See www.illinoistrooper.com for Recruitment Cycle Deadlines

SEND TO: ILLINOIS STATE POLICE MERIT BOARD
3180 ADLOFF LANE, SUITE 100
SPRINGFIELD, IL 62703