

# Holy Name Society

POLICE  
DEPARTMENT



CITY OF  
NEW YORK

BROOKLYN AND QUEENS

Dear Student,

Please fill in the below listed information and return it to the proctor before you begin the examination.

**CHECK ONE:** MALE ( ) FEMALE ( )

**TODAY'S DATE:**

CHILD'S NAME \_\_\_\_\_  
(PLEASE PRINT)

PARENT'S NAME \_\_\_\_\_

NYPD JOB STATUS ACTIVE ( ) RETIRED ( )

IF ACTIVE RANK \_\_\_\_\_ ASSIGNMENT \_\_\_\_\_

ADDRESS \_\_\_\_\_  
(NUMBER AND STREET)

\_\_\_\_\_  
(TOWN) (STATE) (ZIP CODE)

HOME TELEPHONE \_\_\_\_\_  
(AREA CODE) (NUMBER)

SCHOOL YOU CURRENTLY ATTEND \_\_\_\_\_

SCHOOL YOU PLAN TO ATTEND \_\_\_\_\_

If for some reason, you cannot fill in the above information, hold the form until you complete the examination. Once outside the classroom, and before leaving for home, obtain the missing information from your parent and return the form to one of the Holy Name Society Board Officers. Good Luck!

Bruce Petry  
Chairperson