



GARDEN CITY POLICE DEPARTMENT

APPLICATION FOR LETTER OF GOOD CONDUCT



SECTION 1: MUST BE COMPLETED BY APPLICANT

TO: Garden City Police Department
349 Stewart Avenue
Garden City, NY 11530

Type or print clearly and complete the Application for a Letter of Good Conduct form by following these instructions.

Complete all applicable sections of this form with the information pertaining to the research to be conducted. Sign at the appropriate area authorizing for the research to be conducted;

A **United States Citizen** is required to provide two (2) forms of identification that must be copied when submitting this form; a valid NYS Driver's License or State Identification Card, a valid current passport, a Birth Certificate, Military Identification Card, a valid Permanent Alien Registration Card or Employment Registration Card. Individuals who are no longer residing within the Incorporated Village of Garden City must provide proof of a previous Garden City address.

A **Non Citizen** is required to provide two (2) forms of identification that must be copied and notarized as proof of citizenship when submitting this form; a valid NYS Driver's License, a valid current passport, Temporary Alien Registration Card, Employment Registration Card or a Letter from the Department of Immigration and Naturalization Services verifying the applicant's full name, address, and reason for the Letter of Good Conduct; Individuals who are no longer residing within the Incorporated Village of Garden City must provide proof of a previous Garden City address.

Name to be Researched _____

Maiden Name (or any other name used) _____

Date of Birth _____ Place of Birth _____

Social Security Number _____ Phone Number _____

Current Address _____

Previous Address(s) _____

(if residing at Current Address for less than five (5) years)

Indicate Reason Letter of Good Conduct Requested. Attach copies of supporting documentation.

☐ Adoption ☐ Employment ☐ Visa ☐ Application for Citizenship

☐ Other (please explain) _____

Father's Name _____ Mother's Name _____

Name of Applicant _____ Cell # _____

Applicant's Address _____

Email address: _____

Applicant's Signature

Date