



Officer Down, Inc.

PO Box 223

New Egypt, NJ 08533

www.OfficerDownNJ.org

Recipient Application Form

NOTE: If email button doesn't work, please send the form to mbraun@officerdownnj.org or jlarkin@officerdownnj.org

Recipient Information:

Recipient's Name: _____

Recipient's Address: _____

City: _____ State: NJ Zip: _____

Date of Birth: _____ Age: _____

Telephone: _____ Email: _____

Family Information:

Spouse's Name: _____

Spouse's Employer: _____

Dependents Names and Ages: _____

Family Contact: _____ Telephone: _____

Work & Military History:

Department: _____ Years of Service: _____

Work History: _____

Commendations/Awards: _____

Units: _____

Military Service: _____

Contact Information:

1st Work Contact Name: _____

Telephone: _____ Email: _____

2nd Work Contact Name: _____

Telephone: _____ Email: _____

Conditions:

By completing and submitting this application on behalf of a potential recipient, the Department and/or the Fraternal Organization must understand the commitment necessary to fully support your member. The work contact will commit to having a representative at each of Officer Down’s monthly meetings (conducted via Go to Meeting), along with a minimum of one volunteer at each of our events. The representative will also act as a liaison between Officer Down, Inc. and the respective department and other police affiliated organizations. This commitment is required so that the selected recipient and or their family will have the greatest benefit to make an impact on their unique situation. Applications must be completed in full and received by mail or email, no later than **JUNE 1ST**. Each application must be accompanied by at least (5) photos (Department and family photos). Photos can be submitted on disc, mail or email attachment (jpeg format).

Recipients will be selected by the active members of Officer Down, Inc. as the applications come in. The representative submitting or completing the application may be present to introduce the applicant’s package to the group. Recipients and contacts will be notified by an Officer Down, Inc. Executive Board Member upon their selection.

Although we would like to assist all Law Enforcement Officers and their families in need, it is not financially possible to help everyone. Officer Down, Inc. is committed to honoring and remembering the service and sacrifice of the police community. “Not Forgotten”

If there are any questions in regards to the completion of this application, please feel free to contact Officer Down’s Chairman Monica Braun at 866-568-8372.

Details of Disability or Demise:
