

Riverside Township Police 1 West Scott Street Riverside, NJ 08075 (856) 461-8820



APPLICATION FOR INTERNSHIP



NOTICE: N.J.S. 2C:28-3a

A person commits an offense if he/she makes a written false statement which he does not believe to be true, on or pursuant to a form bearing notice, authorized by law, to the effect that false statements made therein are punishable.

INSTRUCTIONS: Read every question carefully. Answer every question, and leave no blank spaces. If a question does not apply to you, notate as such. A candidate who intentionally makes a false statement of a material fact or practiced, or attempted to practice any deception or fraud in this application, in any examination, or in securing eligibility for appointment will be discontinued from this process. The candidate shall personally prepare this application. All entries, except the signature must be PRINTED legibly. If space available for answering question is insufficient, use a separate sheet of paper, attach it to the corresponding page and precede each answer with the corresponding page number and section of the question being answered.

Upon completion, place this application in a sealed envelope addressed to the Chief of Police and deliver in person to the Riverside Township Police no later than ______ at _____. Failure to return this questionnaire properly completed on the listed date and time will result in your immediate removal from the hiring process.

Below Dates to be Filled Out by Background Investigator Only
Date Issued to Applicant: ______ Date/Time Returned by Applicant: ______



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Section I. PERSONAL

Last Na	me	First N	ame	Mi	iddle Name
Give any other names you	u have used or ha	ve been known	oy (nicknames,	maiden name	e, etc), and explain:
Date of Birth:	A	12-	Age:	c > c	_Sex:
	Month	Day	Year	P.	
Height:W	/eight:	Eye Color: _	E H	air Color:	
Current Home Address:	())=	OFFIC	ER		
00	111	DE		<u>(</u>	
Home Phone:	Cell:	Wa	ork:	Other	*
Email Address(es):	112		A		
	12	JER	99. VI		\sim
Place of birth:	City	State	IDE		
	y l	NG AL	BLI		
Social Security Number:	*	JUN J	_ Issuing State		19
Driver's License Number:		NR 2	_State:	Expiratio	n:
Are you a U. S. citizen?	You m	ust be a U.S. Citi	zen. If hired ar	plicant may l	pe required to subm
proof of citizenship.				pheane may i	

Section II. RESIDENCE

	Number	St	reet/ Avenue	
City	County	State	Zip Code	Telephone Number

ion III. EDUCATION HISTORY	A # 1A			
High School:		TE		
School:	from		.0	
Concentration/Major:	Month	Year	Month Rank:	Year
Undergraduate Degree:	OFFICER			
School:	from	22. t	.o	
Concentration/Major:	Month GPA:	Year	Month Rank:	Year
Other:	PIVEDSIDE	9		
School:	from		to	1
Concentration/Major:	Month) GPA:		Month Rank:	Year
Internship Information:	Vou *	30		
Name of College/University:	UT -	25		
Dates Attended:	Expec	ted Gradua	ition Date:	
Internship Program Coordinator:	Pho	one #:		

<u>S</u>

Section IV. EMPLOYMENT

pervisor(s):Contact #: _	
ate hired: Job Title:	****
uties:	10
ive you ever been fired or terminated from any employment? Explain:	
ve you ever been fired of terminated from any employment? Explain.	
A Martine Links	YP 1
POLICE	P.
POLICE	- P
tion V. MILITARY SERVICE	
Have you ever served in an active military organization of the United State	es? Yes or No
Have you ever served in an active military organization of the United State If yes, give details:	es? Yes or No
Have you ever served in an active military organization of the United State	es? Yes or No
Have you ever served in an active military organization of the United State If yes, give details:	*
Have you ever served in an active military organization of the United State If yes, give details:	*
Have you ever served in an active military organization of the United State If yes, give details: If YES, Honorably Discharged? Date: Branch of service: Rank held: Serv How many periods of active military service have you had (enlistments or	ice serial number:
Have you ever served in an active military organization of the United State If yes, give details: If YES, Honorably Discharged? Date: Branch of service: Rank held: Serv How many periods of active military service have you had (enlistments or	ice serial number:
Have you ever served in an active military organization of the United State If yes, give details: 	ice serial number:

Have you ever been ACCUSED or CHARGED with a criminal act(s) as it relates to Domestic Violence? Yes or No

_____ If Yes, provide details:

Have you ever	been the subject of an em	ergency protective order/temporary or final restraining order?
Yes or No	If Yes, provide details:	

Have you or your spouse,	/partner ever been referred to Child Protective Services or the Department of Children and
Families? Yes or No	If Yes, provide details (include names/dates/locations):
Have you worked at any o	other law enforcement agency, either as an employee or intern? If so, where and when?
Yes or No	Agency/Title/Dates:
5	
	POLICE
Did you take the NJDOP L	Law Enforcement Examination? Yes or No
	OFFICER
Date of Exam:	Score:
Do you intend on submitt	ting an application to be employed as a police officer with the Riverside Township Police
Department? Yes or No	
210	
If 'YES', when?	
	TVEPS DE
If 'No', what are your futu	ure plans?
	* NJ
V	
Attachments Required:	

- Official letter from Intern Coordinator and/or school syllabus with intern requirements
- Transcript from current college/university
- Resume and cover letter

STATE OF NEW JERSEY COUNTY OF BURLINGTON TOWNSHIP OF RIVERSIDE

I, Being duly sworn, depose	and
(CANDIDATE)	
say I am the above person. I signed the foregoing statement. I personally read and printed by ha	and,
answers to each and every question therein and I do solemnly swear that each and every answer	is full,
true and correct in every respect.	
The Bar Internet of the	
Applicant sign here	
POLICE	
OFFICER	
Application mailed, emailed or delivered on	_
PILL DE O	
VERSIVERS A	
* NJ	
DO NOT WRITE BELOW THIS LINE	
DATE	

AUTHORIZATION FOR RELEASE OF INFORMATION

To any Doctor, Hospital, Medical Association, US Armed Forces, Maritime Service, Veterans Administration, or, any Academic Dean, Registrar, Principal, Guidance Counselor, other authorized person at school (college, business, trade or high school) or any past or present employer, credit bureau or retail merchants association, bank, financial institution or any other credit extending agency, or the US Selective Service System.

reside	at
 reside	at

And have applied for an internship with the Riverside Township Police Department. I am aware that my entire background is to be investigated. I hereby authorize and request the release of any and all information you have concerning me (including a transcript of any academic record) to the Riverside Township Police Department or its agent upon presentation of this release or copy thereof.

PULICE

Selective Service Number if applicat Armed Forces Service or Serial Num		CER	
Veterans Administration Claim Num			
			175 17/
Given under my hand this	Day of	20	
		TO A	
	RIVER	Name of Applicant	212
	DOM N	J MA	10
	Vice	Signature of Applicant	
40	w.st	19	
	NOF	*	
A COL			