



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



APPLICATION FOR EMPLOYMENT

Last Name	First Name	Middle Name
_____		_____
Address		City

County	State	Zip Code

READ CAREFULLY PRIOR TO FILLING OUT APPLICATION

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 removed from the hiring process.** The candidate shall personally prepare this application. All entries, except the signature must be PRINTED legibly. Entries must be made in blue ink. 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

Full Name: _____
Last Name
First Name
Middle Name

Give any other names you have used or have been known by (nicknames, maiden name, etc), and explain:

Date of Birth: _____ Age: _____ Sex: _____
Month
Day
Year

Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____

Current Home Address: _____

Home Phone: _____ Cell: _____ Work: _____ Other: _____

Email Address(es): _____

Place of birth: _____
City
State

Birth Certificate: _____
Number
City or Town
State
Country

Social Security Number: _____ Issuing State: _____

Driver's License Number: _____ State: _____ Expiration: _____

Are you a U. S. citizen? _____ You must be a U.S. Citizen. If hired, applicant may be required to submit proof of citizenship.

Section II. RESIDENCE

Current residence:

Number Street/ Avenue

City County State Zip Code Telephone Number

Length of time at current location: _____

Section III. EDUCATION

What is your highest level of education completed?

___ **General Equivalency Diploma**

___ **High School:**

School: _____ from _____ to _____

Month Year Month Year

Concentration/Major: _____ GPA: _____ Rank: _____

___ **Undergraduate Degree:**

School: _____ from _____ to _____

Month Year Month Year

Concentration/Major: _____ GPA: _____ Rank: _____

___ **Masters Degree:**

School: _____ from _____ to _____

Month Year Month Year

Concentration/Major: _____ GPA: _____ Rank: _____

___ **Doctorate:**

School: _____ from _____ to _____

Month Year Month Year

Concentration/Major: _____ GPA: _____ Rank: _____

___ **Other** _____

Section IV. EMPLOYMENT

Current Employer

Company Name _____ Address _____ City/State/Zip _____ Phone Number _____

Supervisor(s): _____ Contact #: _____

Date hired: _____ Job Title: _____

Duties: _____

Have you ever been fired or terminated from any employment? Explain: _____

Section V. MILITARY SERVICE

Have you ever served in an active military organization of the United States? Yes or No _____
If yes, give details:

Branch of service: _____ Rank held: _____ Service serial number: _____

How many periods of active military service have you had (enlistments or recalls)

Give periods or period of active service:

From _____ to _____ from _____ to _____
From _____ to _____ from _____ to _____

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 emergency 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 ever been arrested or charged with a crime? Yes or No _____ If Yes, explain:

Did you take the NJDOP Law Enforcement Examination? Yes or No _____

Date of Exam: _____ Score: _____

List every law enforcement agency to which you've applied for employment:

Agency Name:

Date of Application:

Result:

List all the languages you are fluent in (can speak, read, write) and years fluent in that language:

Language:

Years:

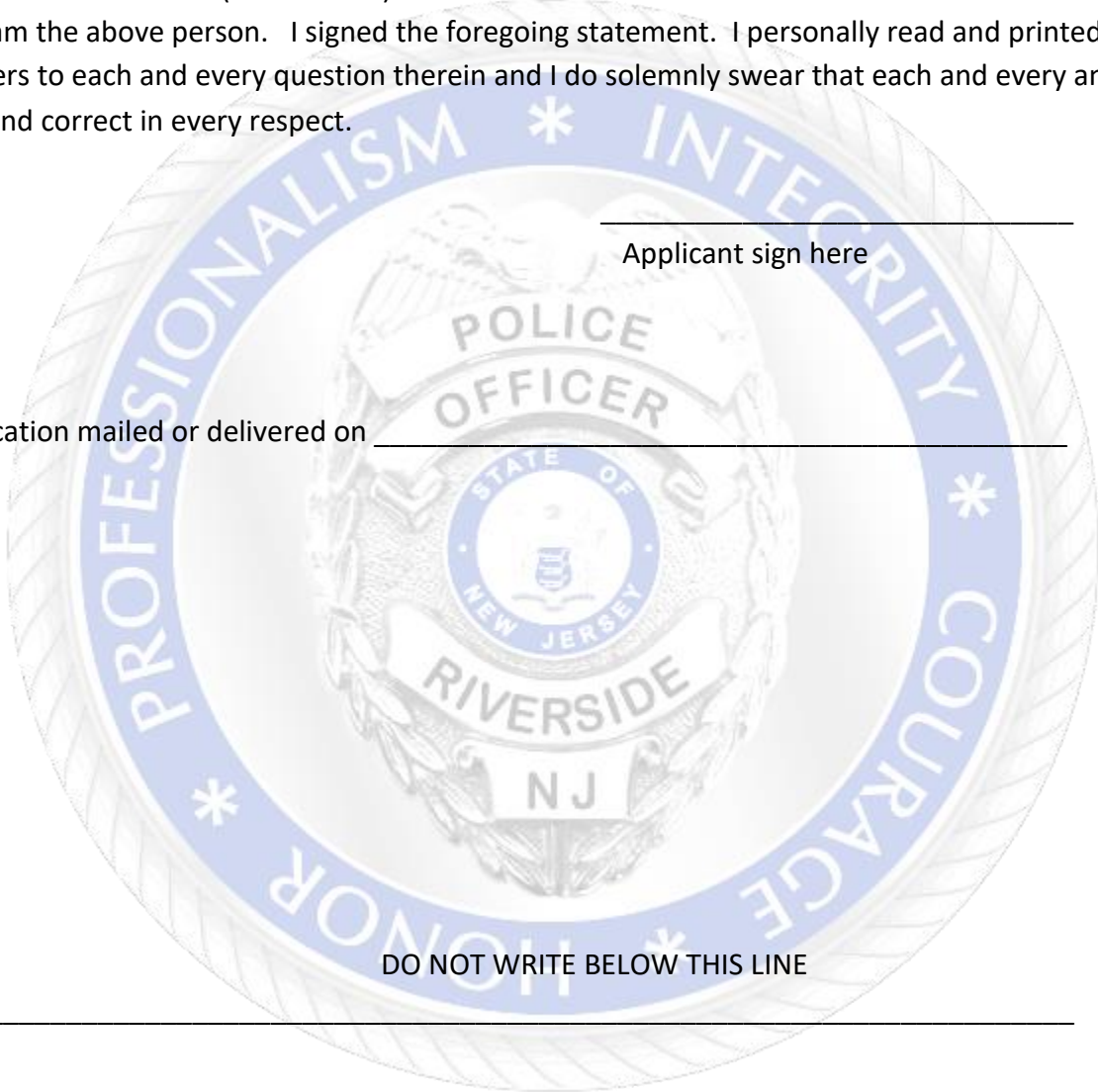
**STATE OF NEW JERSEY
COUNTY OF BURLINGTON
TOWNSHIP OF RIVERSIDE**

I, _____ Being duly sworn, depose and
(CANDIDATE)

say I am the above person. I signed the foregoing statement. I personally read and printed by hand, 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.

Applicant sign here

Application mailed or delivered on _____



DO NOT WRITE BELOW THIS LINE

DATE _____

Signature of Investigation Officer