

NEPTUNE TOWNSHIP POLICE DEPARTMENT

APPLICATION FOR EMPLOYMENT

Jailor

The Neptune Township Police Department is an equal opportunity employer in all facets of the personnel process.

Check the position(s) you are applying for: Police Officer SLEO III SLEO II SLEO I SLEO I

Check any active NJPTC certifications you have: Police Officer (Class A) SLEO II SLEO I Retired NJ Officer (within last 3 years)

	PERSONAL I	NFORMATION				
NAME (Last, First, Middle) Date of Birth			Date of Birth			
Driver's License Number/State S			Social Security Numb	Social Security Number		
Primary Phone #	Email Address		Height	Weight		
Current Address	urrent Address City					
State Zip Code						
	QUESTI	ONNAIRE				
Your answers to these question immediately disqualify y You must disclose all expur	ou from employn	nent with the NTP	D.	Yes	No	
Are you a Citizen of the U.S.A?						
Do you possess a valid NJ Driver's Licer						
Has any driver's license issued to you e		ded or revoked?				
Do you possess a high school diploma						
Do you possess an Associates Degree or at least sixty College/University credits?						
Have you been honorably discharged from any branch of the U.S. Military? Have you successfully passed the NJ Chief's of Police written & physical exam, and are you						
	liers of Police wr	itten & physical exa	am, and are you			
currently on an active list? Are you fluent in any languages beside	c English2					
Do you have any tattoos that are expos	-	a long-sleeve shir	+2			
Have you ever been arrested or convic						
· · · · · · · · · · · · · · · · · · ·		ense or issused a Re	estraining Order?			
Have you ever been convicted of a Domestic Violence offense or issused a Restraining Order? Have you ever been convicted of Driving While Intoxicated?						
Are you currently on probation or have you been on probation within the last 3 years?						
Have you ever renounced your United						
If you were offered the positi			would you be able i	to:		
Work rotating shifts? (including overni	ght)					
Work overtime if needed?						
Work any day of the week?						
Perform any duties or assignments?						
Wear a uniform?						
Testify under oath in court?						
Use physical force on another person pursuant to department regulations?						
Carry and use a firearm pursuant to regulations including the use of deadly force to						
defend your life or the life of another?						

			EDUCATION			
	Institution Name		Years		Graduate or Degree, Total Credits Earned	
High School	Institut	tion Name	Attended	Field of Study	Total Cr	edits Earned
College/University						
Business/Technical						
Additional/Other						
			APLOYMENT HIS			
List most i	recent emplo	oyment first, in	cluding summer or t	emporary jobs, and any	military servic	e.
Employer name and address:		Position title/duties, skills:			Start date:	End date:
		_			Reason for l	eaving
Supervisor:		_				
Telephone:						
Employer name and	address:	Position title/	duties, skills:		Start date:	End date:
		_			Reason for l	eaving
Supervisor:		_				
Telephone:						
Employer name and address:		Position title/	duties, skills:		Start date:	End date:
		_			Reason for l	eaving
Supervisor:		_				
Telephone:						
Employer name and	address:	Position title/	duties, skills:		Start date:	End date:
		_			Reason for l	eaving
Supervisor:		_				
Telephone:		_				
Employer name and	address:	Position title/	duties, skills:		Start date:	End date:
		-			Reason for l	eaving
						,B
Supervisor:						
Telephone:			·			

Enter any additional information here:

SKILLS AND QUALIFICATIONS

List any relevant certifications or professional licenses held (EMT, HazMat Technician, Firefighter etc):

REFERENCES List three personal references, who are not relatives, who have known you well during the past five years.						
Name	Address	Telephone	Occupation	Years Known		
Name	Address	Telephone	Occupation	Years Known		
Name	Address	Telephone	Occupation	Years Known		

INFORMATION TO THE APPLICANT

As part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. You may make a written request for information derived from the checking of your references.

You will be required to: supply your birth certificate or other proof of authorization to work in the United States, have a physical and psychological examination and a drug test. I also understand that these positions require background and criminal checks. I understand and agree to the information shown above.

Equal Employment Opportunity: While many employers are required by federal law to have an Affirmative Action Program, all employers are required to provide equal employment opportunity and may ask your national origin, race and sex for planning and reporting purposes only. This information is optional and failure to provide it will have no affect on your application for employment.

Signature of Applicant

Date

Township of Neptune Police Department 25 Neptune Blvd. Neptune, NJ 07753 Phone: 732-988-8000 Fax: 732-988-8442



APPPLICANT INFORMATION RELEASE FORM

Name: Address:

Social Security #: _____ Date of Birth: _____

To all Courts, Probation Departments, Selective Service Boards, physicians, hospitals, employers, educational and other institutions and agencies without exception:

I, ______, am making an application for employment to the Neptune Township Police Department. As a result, an investigation is being conducted to determine my eligibility. Therefore, you are authorized to release to the Neptune Township Police Department and its representatives any and all information, documentary or otherwise, including medical information, pertaining to me that they may request.

I hereby release, discharge and exonerate the Neptune Township Police Department, its agents and any representatives and any persons furnishing information from any and all liability of every nature and kind arising out of furnishing, inspection or collection of such documents, records and other information or the investigation made by the Neptune Township Police Department.

A copy of this authorization will be considered as effective and valid as the original.

Witness:_____

Notary:_____

My commission expires:

Date:_____

Date:

Date:

NOTARY

VOLUNTARY AFFIRMATIVE ACTION INFORMATION

You are <u>not</u> required to provide this information. Provide only if you wish. If you provide information on this page, it will be filed separately from the job application.

Date:	Position(s) Applied For:					
Referral Source:						
□ Advertisement	□ Friend	□ Relative	□ Walk-in	□ News	paper	
Employment Ager	ncy 🗖 Neptu	une Police W	ebsite □ Soc	ial Media	□ Other	
Gender: 🛛 Male 🗖	Female	X or Non-Bi	nary			
Ethnicity:						
Are you Hispanic or Latino	?					
🗖 No, I am not Hispa	nic or Latino.					
Yes, I am Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, Central or South American, or other Spanish culture or origin, regardless of race.						
What is your race? Select ONE of the following categories(s):						
□ American Indian / Alaskan Native □ White						
□ Asian			□ Two or More Races			
Black or African American			□ Other			
□ Native Hawaiian or Other Pacific Islander						
Do you identify as LGBTQ	+: □ Yes	🗆 No				
FOR PERSONNEL DEPARTMENT USE ONLY						
Position(s) Applied For Is (Open: 🗆 Yes	🗆 No	Date: _			
Position(s) Considered For:						