



**TOWNSHIP OF NEPTUNE
OFFICE OF EMERGENCY MANAGEMENT
25 Neptune Boulevard
Neptune, NJ 07753
Phone 732-988-5200 Ext 242**

APPLICANT INFORMATION:

Name _____
Last First M.I

Address _____
Number & Street (PO Box not acceptable)

City State Zip

Contact Information:
Cell: _____
Carrier: _____

SSN# _____ Alt. #: _____

Email: _____

Are you a member of a First Aid Squad or Fire Company? ___Yes ___No

Please provide name of agency _____

Do you have any medical limitations? ___Yes ___No

Do you hold any relevant certifications? ___Yes ___No

If so please list certifications and date:

Have you ever been convicted of or plead guilty to a crime, misdemeanor, disorderly person's offense (other than a parking ticket), in New Jersey or elsewhere, which has not been expunged? Yes NO

If your answer is "yes" give the date and nature of each offense, the name and location of the court and the disposition of the case.

Date(s) and Nature of Charge(s) _____
Date(s) Nature of Charge (s)

Name and Location of Court: _____
City(s) State(s)

Disposition: _____

A conviction will not automatically disqualify you from consideration of membership. Whether a conviction will disqualify an applicant depends upon (1) the nature and gravity of the offense, (2) the nature of the job being sought, and (3) the length of time since the conviction and/or completion of the sentence. A false statement or omission will disqualify you from membership.

Do you have a valid NJ Driver's License? Yes No

NJ Drivers License #

Do you have a valid NJ Commercial Driver's License (CDL)? Yes No

Class Endorsements

Do you have personal auto insurance Yes No

Policy # and Insurance Company Name

Please provide the names of three people (not related to you) that have known you for at least five (5) years, who can attest to your character, knowledge and abilities

Name and Address	Occupation	Phone Number
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Please provide a short resume of why you would like to volunteer for Neptune Township Office of Emergency Management.

Please return application to: Township of Neptune
Office of Emergency Management
25 Neptune Boulevard
PO Box 1167
Neptune, NJ 07753
Attn: Courtney Langer