

POSITION:
SOCIAL SECURITY NO.



BOROUGH OF BELMAR POLICE DEPARTMENT APPLICATION FOR EMPLOYMENT

PRINT NAME	LAST	FIRST	MIDDLE
MAILING ADDRESS		Number & Street	City/Town
County	State	Zip Code	

**READ THESE INSTRUCTIONS CAREFULLY
PRIOR TO FILLING OUT APPLICATION**

INSTRUCTIONS: Read every question carefully. **Answer every question—leave no question unanswered. – If the question does not apply to you, so state: DNA.** A candidate will be rejected who has intentionally made a false statement of a material fact or practiced or attempted to practice any deception or fraud in the application, in any examination, or in securing eligibility for appointment. This candidate will personally prepare this form. All entries, except the signature, **must be printed legibly in BLOCK LETTERS.** Entries must be made in either **blue or black ink.** If space available for answering any question is insufficient, use the **continuation pages** include and precede each answer with the number of the question being answered.

AN EQUAL OPPORTUNITY EMPLOYER

Date Received: _____

**ATTACH
PHOTO
HERE**

- White (Male) _____
- White (Female) _____
- Black (Male) _____
- Black (Female) _____
- Hispanic (Male) _____
- Hispanic (Female) _____
- Asian (Male) _____
- Asian (Female) _____
- American Indian (Male) _____
- American Indian (Female) _____

Personal Data

1. What is your full name? _____
Last Name First Name Middle Name
2. Give any other names you have used or been known by, and attach a statement, giving reasons (if none, so state) _____
3. Where were you born? _____
City/Town State/Country Zip Code
4. Birth Certificate _____
Number City/Town State Zip Code Country
5. Date of Birth _____ Age _____ Sex _____
Height _____ Weight _____ Eyes _____ Hair _____
6. Social Security Number: _____ State Issued: _____
7. Do you wear contact lenses or glasses? Yes or No _____
8. Home Telephone Number: _____ Cell Phone Number: _____
9. Email Address: _____

Citizenship

9. Are you a native born or naturalized citizen? Native Born _____ Naturalized _____

If you are of foreign birth, or are a naturalized citizen, fill in the following:

Country of birth _____

Port of place of departure for the United States _____ Date _____

How were you transported into the United States? (Ship, Plane, Train, etc.) _____

Name of transport conveyance and or company you arrived on _____

Port or place of entry into the United States _____ Date _____

If a naturalized citizen, name and address of person who sponsored you on arrival _____

First address after arrival _____

How did you obtain citizenship? _____

Petition Number _____ Date _____ Court _____

State _____ Certificate Number _____

Social Status

10. Are you single, married, separated, divorced, widowed, or widowed? _____

11. Give following information regarding marriage or marriages. List number of times married: _____

11 a. Were you ever the victim or defendant in a restraining order or portestor order in this or any other state? _____

When	Where	By Whom	Wifes Maiden Name or Husbands Name

12. If separated, state reason _____

13. If separated or divorced, what is the present address of that person? _____

14. How many times were you legally or voluntarily separated? _____

15. Were you ever divorced or had a marriage annulled? _____ How many times _____

16. If ever separated, annulled, or divorced, indicate which below, and fill in required information:

Separated, Annulled, Divorced (Indicate)	Date Issued	By Whom	Where Issued (Court and State)	Offending Party as Decreed by Law	Reason

17. Where you ever the parent of any children, whether alive or deceased? Yes or No _____

18. List below every child born to you:

Name	Date of Birth	Place of Birth	With Whom and Where Does Child Reside

19. Are you now supporting all children born to you, including adopted, and stepchildren? _____

If no, state full details _____

20. Have you ever been involved as a plaintiff or defendant in a paternity proceeding? _____

If yes, state full details _____

21. If single, list name, etc., (of at least one) girlfriend/boyfriend, past or present:

Name (Relationship)		Full Address (Include Zip Code)		
Full Date of Birth	Social Security Number	Name of Business/Employer	Occupation and Work Phone No.	Home Phone No.

Name (Relationship)		Full Address (Include Zip Code)		
Full Date of Birth	Social Security Number	Name of Business/Employer	Occupation and Work Phone No.	Home Phone No.

22. Family information – Father, mother, brothers/sisters, spouse, stepfather/stepmother:

Name (Relationship)		Full Address (Include Zip Code)		
Full Date of Birth	Social Security Number	Name of Business/Employer	Occupation and Work Phone No.	Home Phone No.

Name (Relationship)		Full Address (Include Zip Code)		
Full Date of Birth	Social Security Number	Name of Business/Employer	Occupation and Work Phone No.	Home Phone No.

Name (Relationship)		Full Address (Include Zip Code)		
Full Date of Birth	Social Security Number	Name of Business/Employer	Occupation and Work Phone No.	Home Phone No.

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Name (Relationship)		Full Address (Include Zip Code)		
Full Date of Birth	Social Security Number	Name of Business/Employer	Occupation and Work Phone No.	Home Phone No.

Name (Relationship)		Full Address (Include Zip Code)		
Full Date of Birth	Social Security Number	Name of Business/Employer	Occupation and Work Phone No.	Home Phone No.

23. List names of three friends and or associates other than vouchers:

Name (Relationship)		Full Address (Include Zip Code)		
Full Date of Birth	Social Security Number	Name of Business/Employer	Occupation and Work Phone No.	Home Phone No.

Name (Relationship)		Full Address (Include Zip Code)		
Full Date of Birth	Social Security Number	Name of Business/Employer	Occupation and Work Phone No.	Home Phone No.

Name (Relationship)		Full Address (Include Zip Code)		
Full Date of Birth	Social Security Number	Name of Business/Employer	Occupation and Work Phone No.	Home Phone No.

List names of members of the Belmar Police Department which you are socially or personally Acquainted with:

Name	Address (if known) or Department	Badge No.	Social/Personal

List names of any relatives in the law enforcement field:

Name	Address (if known) or Department	Badge No.	Relationship

Residence

24. Where do you now reside? _____ Phone No. _____
Number & Street

_____ City County State Zip Code

25. How long have you resided there? _____ With whom do you reside? _____
 Floor No. _____ Apartment No. _____ Front _____ Rear _____
 (Check) North _____ South _____ East _____ West _____

26. If you live with someone other than spouse or parents list:

_____ Name Date of Birth Occupation Social Security Number

27. In chronological order (starting with most recent), state each and every place in which you have resided since birth.

From		To		Address (Street, Apt., City, State, Zip Code)
Mo.	Year	Mo.	Year	

28. List all places where you registered or voted (if none, so state):

County	State	Year

County	State	Year

Education

29. List chronologically (most recent first) all schools, colleges and training courses you have attended:

School		Exact Address	Zip Code
From _____ To _____		Day or Evening	Last Grade or Term
Month Year Month Year			
School		Exact Address	Zip Code
From _____ To _____		Day or Evening	Last Grade or Term
Month Year Month Year			
School		Exact Address	Zip Code
From _____ To _____		Day or Evening	Last Grade or Term
Month Year Month Year			
School		Exact Address	Zip Code
From _____ To _____		Day or Evening	Last Grade or Term
Month Year Month Year			
School		Exact Address	Zip Code
From _____ To _____		Day or Evening	Last Grade or Term
Month Year Month Year			

30. What college degree(s) or professional license(s) do you possess? _____

Majoring in _____ Grade point average (cummulative) _____

Total credits achieved toward degree _____

31. Other than english what language(s) do you:

Speak _____

Understand _____

32. List any problems with school (absenteeism, tardiness, poor grades, other discipline problems) – include college.

Date	School	Problem

33. It is understood that I will immediately have forwarded transcripts from all colleges attended to: Belmar Police Department P.O. Box A Belmar, New Jersey 07719. All necessary fees must be forwarded to the college by the applicant.

Military Service

34. Have you ever served in an active military organization of the United States? Yes or No _____

35. Have you ever served in a military organization of any foreign government? Yes or No _____

If yes, give details _____

36. Give branch of service _____

Military Specialty _____

37. Rank held _____ Service Serial Number _____

38. How many periods of active military service have you had (drafts, enlistments or recalls to service)? _____

39. How many discharges or separations from the service were given to you? _____

40. Give period or periods of active service:

From _____ To _____ From _____ To _____

From _____ To _____ From _____ To _____

41. List all medals and decorations awarded you as a member of the armed forces: _____

42. What type of discharge(s) or separation(s) (honorably, dishonorably, honorable conditions)

Be exact. _____

43. Has your discharge or separation notice ever been corrected or changed? Yes or No _____

44. What was the nature of the change? Changed from _____ to _____

45. Were you ever court martialed, tried on charges, or were you the subject of a summary court, deck court, captain's mast, company punishment, or any other disciplinary action?

Yes or No _____ Number of times _____

If yes, give details of charges and dispositions _____

46. Are you now or were you ever an active or inactive member of the Reserve Forces (any branch) of the United States, any foreign government, or the National Guard of any state?

Yes or No _____ If yes, state which – active or inactive _____

Branch _____ Regiment _____ Unit _____ Rank _____

Address _____ From _____ To _____

Selective Service

47. Selective Service Number _____ Last Classification _____

Employment

48. Present Employer:

_____	_____	_____	_____	_____
Name/Company	Number & Street	City/Town	State/Zip	Phone No.
Date hired _____	Supervisor _____			
Duties _____				

49. Are you now engaged in any business as an owner (active or silent), partner, stockholder, or corporate member?

Yes or No _____ If yes, give details _____

50. Has your name ever been submitted or used as a trustee, officer, or in any capacity, or any labor or trade union, organization or affiliate? Yes or No _____ If yes, give details _____

51. Using the chart on the following page list **chronologically** most recent dates first, each and every place you were previously employed: **Omit none. Give correct, full addresses. Give dates of idleness between period of employment in proper sequence. (include all part-time employment.)**

52. Were you ever discharged or asked to resign from employment? Yes or No _____
How many times? _____ Give details of discharge or forced resignations (include
employer's full address, phone number, date of occurrence, supervisors name, and the reason for the
discharge) _____

52a. Have you ever been injured at work? _____
If yes did you collect w/c? _____

53. Were you ever subjected to disciplinary action in connection with any employment?
Yes or No _____ If yes, give details _____

54. Have you, your spouse, or any corporation or partnership of which he/she was an officer, director, or
partner, ever possessed a license or permit (excluding driver's license or learner's permit) issued by
any governmental agency? Yes or No _____ If yes, give details _____

Has any such license or permit ever been revoked, cancelled or suspended? Yes or No _____
If yes, give details _____

55. Have you ever sponsored, vouched for, served as character witness for, or made any
recommendations for or concerning any person or premises to any municipal, state or federal agency
in connection with the issuance, revocation, or suspension of any license or permit or for any other
reason? Yes or No _____ If yes, give details _____

56. Have you ever received unemployment insurance or other federal, state or local benefits or
assistance? Yes or No _____ Kind _____

Local office _____ Address _____

Give periods:

From _____ To _____ From _____ To _____

From _____ To _____ From _____ To _____

Have you ever received any allowance to which you were not entitled? Yes or No _____

If yes, explain _____

57. Have you made application with any other police organization? Yes or No _____ If yes, list
when, where and the present status of that application _____

58. Have you ever been rejected by another police department for employment? Yes or No _____
 If yes, list when, where and why _____

59. Were you ever a member of a social, labor, or fraternal organization? Yes or No _____ If yes,
 list below every such organization.

From		To		Name & Full Address of Organization	Type of Organization
Mo	Yr	Mo	Yr		

General

60. Have you ever petitioned for bankruptcy? Yes or No _____

61. Have you any loan, debt, garnishee, wage assignment, lien, or judgment pending against you? Yes
 or No _____ If yes, give details _____

Type: Loan, credit card, garnishee, judgment, etc.	With whom: Name Full Address & Phone Number including area code	When Incurred	Original Amount	Present Amount	Monthly Payments	Amount of Arrears

62. Are you a co-maker on an outstanding loan? Yes or No _____ If yes, give details _____

63. Have you ever been bonded? Yes or No _____ With respect to each time bonded, state
 details below:

Reason	By Whom – Name, Address and Phone Number	Date

64. Have you ever been refused a bond? Yes or No _____ If yes, by whom _____

65. Were you or your spouse ever summoned or subpoenaed to court in a civil action or proceeding in
 this state or elsewhere, or could such a possibility ensue as a result of a recent occurrence or

transaction? Yes or No _____ Indicate below every civil action or proceeding in which you or your spouse were a party and also the contingent possibilities as described above.

Date	Action or Proceeding	As Plaintiff, Defendant, Petitioner, Respondent or Witness	Court Disposition

Arrests, Summonses, Etc.

66. Have you ever been arrested for or charged with Juvenile Delinquency? Yes or No _____

If yes, insert information below:

Date	Age	Violation Actual Charge	Location	Charge Reduced To	Court Disposition of Sentence	Police Agency Concerned

67. Have you ever been summoned, subpoenaed, requested or otherwise required to testify before any municipal, state, or federal agency, committee or other investigative body? Yes or No _____

If yes, give details: _____

68. Have you ever received a summons for any violation of the fish and game laws? Yes or No _____

If yes, insert information below.

Date	Age	Violation Actual Charge	Location	Charge Reduced To	Court Disposition of Sentence	Police Agency Concerned

69. Have you ever been arrested for, or charged with, a violation of the disorderly persons act or city ordinance? Yes or No _____ If yes, insert information below.

Date	Age	Violation Actual Charge	Location	Charge Reduced To	Court Disposition of Sentence	Police Agency Concerned

70. Have you ever been arrested, indicted, or convicted for any violation of the criminal law? Yes or No _____ Have you ever had any criminal record expunged? Yes or No _____ If the answer to either question is yes, insert information below:

Date	Age	Violation Actual Charge	Location	Charge Reduced To	Court Disposition of Sentence	Police Agency Concerned

71. Have you ever been held as a material witness? Yes or No _____ If yes, insert information below.

Date	Age	Reason	Location	Disposition	Police Agency Concerned

72. Have you ever been held as a suspicious person or investigated by any law enforcement or private security agency for any reason? Yes or No _____ If yes, insert information below.

Date	Age	Reason	Location	Disposition	Police Agency Concerned

73. Have you ever been fingerprinted? (Exclude only present application with the Belmar Police Department)? Yes or No _____ If yes, fill in the following:

When	Where	Purpose

Subversive Affiliations

74. Are you now, or have you ever been, a member of any Communist, Communist-front, or other subversive organization, association, movement, or group, which advocates the overthrow of our constitutional form of government, or which seeks to alter the form of government of the United States by unconstitutional or unlawful means? Yes or No _____
75. Are you now, or have you ever been, affiliated or associated with any of the organizations or groups described in question 74? Yes or No _____
76. Are you now associating with, or have you ever associated with, any individuals, including relatives, who you know or have reason to believe are, or have been, members of any organization or groups described in question 74? Yes or No _____
77. Have you ever signed or solicited others to sign any petition sponsored or issued by any organization or group described in question 74, or any petition which has as its purpose the iading of any person, cause or program connected in any way with organizations or groups described in question 74? Yes or No _____
78. Have you ever participated in any of the following activities:
- a. Attendance or participation in any parade, picket line, delegation, demonstration, affair, forum, or project, sponsered or organized by any organization or group described in question 74? Yes or No _____
 - b. Payment or collection or any money, dues, contributions, or donations to any organization or group described in question 74? Yes or No _____
 - c. Sale or distribution of any written or printed matter prepared, reproduced, or published by any group or organization described in question 74, or any of it's agents? Yes or No _____
 - d. Purchased or subscribed to any publication or periodical prepared, reproduced, or published by any group or organization described in question 74 or any or it's agents? Yes or No _____
79. If your answer is **YES** to any of the above questions, explain _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

Motor Vehicle History

80. Have you ever received a summons for violation of the Motor Vehicle Laws in this or any other state? Yes or No _____ If Yes, insert information below.

Date	Age	Violation Actual Charge	Location	Charge Reduced To	Court Disposition of Sentence	Police Agency Concerned

81. Was your Motor Vehicle Registration Certificate, Driver's or other vehicle operator's license ever revoked? Yes or No _____ Suspended? Yes or No _____
 Which license? _____ When? _____ Where? _____
 Why? _____

82. If answer to previous question is "Yes", was such Registration Certificate or Driver's License ever restored? Yes or No _____ When? _____ Where? _____

83. Have you ever been involved in a motor vehicle accident either as a registered owner or operator which resulted in any personal injury or property damage? Yes or No _____ If Yes, state details _____

84. If you possess any of the following, complete the information below:

Item	Number	State		Date Issued	Date Expires
Motor Vehicle Registration	Plate Number		Year/Make Model/Color		
Second Motor Vehicle Registration	Plate Number		Year/Make Model/Color		
Motor Vehicle Driver's License	Number		Restriction Code		
Operator's License Any Other Vehicle	Number		Explain		

85. Did you ever possess a chauffeur's or commercial driver's license (CDL) or operator's license issued by any state other than New Jersey? Yes or No _____ If yes, give state and number _____

Other Information

86. Have you ever possessed any pistol, firearm permit, firearms ID card, firearms dealer license in this state, any other state/federal? Yes or No _____ Permit Number _____
Firearms Dealer's License Number _____ Issuing Agency _____

87. Have you ever used any illegal drugs? Yes or No _____ If yes, state details _____

88. Have you ever previously taken an examination for appointment to the Belmar Police Department? Yes or No _____ If yes, list date(s) of written examination _____

Has a background investigation ever been conducted on you by the Belmar Police Department? Yes or No _____

89. Do you have any knowledge or information in addition to that specifically called for in the preceding questions which is or which may be relevant, directly or indirectly, in connection with an investigation of your eligibility and qualifications for the position of Police Officer in the Belmar Police Department, including but not limited to, knowledge or information concerning your character, temperance, habits, education, subversive activities, family, association, criminal records, traffic violations, residence or otherwise? Yes or No _____ If yes, give details _____

90. List all social activities or clubs you are involved in. _____

91. Please attach a photocopy of the following documents:

Birth Certificate

Social Security Card

Valid New Jersey Drivers License

Military Identification Card

Relevant Military Documents

High School Diploma

College Diploma

High School/College Transcripts

Any Law Enforcement Certifications including accommodations, awards,

CPR/First Responder Certifications

Vouchers

(NOT TO BE SWORN MEMBERS OF THE BELMAR POLICE DEPARTMENT OR ANY OTHER PERSON LISTED IN THIS APPLICATION)

Upon completion of this form, the applicant must obtain three reputable citizens (no relatives) who will vouch for the honesty, reputation and ability of the applicant.

The voucher should read carefully all statements made by the applicant **Before Signing**. Then, the voucher portion of the form should be completed by the voucher and signature affixed.

* * * * *

I, the undersigned, declare that I am over eighteen years of age, that I have personally known the applicant for at least one year, that I have read the whole of the foregoing application and believe all the statements herein to be true. I am not related in any way to the applicant. I will, upon request, give further facts concerning the applicant as I may possess.

ALL INFORMATION WILL BE TREATED AS CONFIDENTIAL

VOUCHER ONE

(Please Print)

Name _____	Business Address, Area Code & Phone No. _____
Address _____	_____
City, State, Zip Code _____	Occupation _____
Phone No. (Area Code) _____	How long have you personally known the applicant? _____
Date of Birth _____	Is applicant of good character and reputation? _____
Social Security Number _____	Signature & Date _____

VOUCHER TWO

(Please Print)

Name _____	Business Address, Area Code & Phone No. _____
Address _____	_____
City, State, Zip Code _____	Occupation _____
Phone No. (Area Code) _____	How long have you personally known the applicant? _____
Date of Birth _____	Is applicant of good character and reputation? _____
Social Security Number _____	Signature & Date _____

VOUCHER THREE

(Please Print)

Name _____	Business Address, Area Code & Phone No. _____
Address _____	_____
City, State, Zip Code _____	Occupation _____
Phone No. (Area Code) _____	How long have you personally known the applicant? _____
Date of Birth _____	Is applicant of good character and reputation? _____
Social Security Number _____	Signature & Date _____

Certification

I certify that all of the the statements made in this application are true, complete and correct to the best of my knowledge and belief, and are made in good faith. I am aware that any misrepresentation of information supplied by me will result in my disqualification from the selection process. Further, I authorize the Belmar Police Department to verify any and all information contained herein and to review my employment, education, financial and criminal history, military, disciplinary and other records and information from any source as noted in the duly executed Authority and Release Form.

I have read this Certification and I understand and agree the conditions imposed herein.

Date: _____ Signature: _____
(Sign in Ink)

(Print Name)

State of: _____

County of: _____

Sworn to and subscribed before me this

_____ Day of _____, 19 _____

(Print Name and Title)

Signature (Sign in Ink)

Notary Public, my Commission

Expires: _____

DO NOT WRITE BELOW THIS LINE

Signature of applicant made in presence of investigator

Date

Signature of Investigating Officer

BOROUGH OF BELMAR, NEW JERSEY
OFFICE OF CHIEF OF POLICE



601 MAIN STREET, P.O. BOX A
BELMAR, NEW JERSEY 07719

TO ALL COURTS, PROBATION DEPARTMENTS, SELECTIVE
SERVICE BOARDS, HOSPITAL, AND OTHER INSTITUTIONS AND
AGENCIES, WITHOUT EXCEPTION:

I, _____, am making application for

As a result, an investigation is being conducted to determine my eligibility. Therefore, you
are authorized to release to the Belmar Police Department or its representative any and all
information, documentary or otherwise, pertaining to me that they require.

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

DATE:
SIGNATURE:
WITNESS:

