

#### **Shrewsbury Borough Police Department**

#### Special Law Enforcement Officer: Class II

**CLICK HERE FOR APPLICATION** 

The Shrewsbury Borough Police Department is now accepting applications for the position of Class II Special Law Enforcement Officer. Applicants must possess all the following:

1. Valid NJ Police Training Commission Certificate for Class A OR SLEO II.

2. Valid NJ driver's license.

3. Candidates must have a high school diploma or G.E.D.

Interested candidates <u>must drop off their application in person</u> at the Shrewsbury Borough Police Department 419 Sycamore Avenue Shrewsbury, NJ 07702

Applications are to be submitted to the Police Records Clerk (2nd floor)

The Borough of Shrewsbury is an equal opportunity employer.

# **APPLICATION FOR EMPLOYMENT**

## SHREWSBURY BOROUGH POLICE DEPARTMENT

T:				
	Last Name	First	Midd	le
	Street Address			
	City	County	State	Zip Code
Appl	ication for position of:	Police Officer	SLEO II 🗌	Both
	your current level of co ding the Academy.	ertification or level of	certification you	n will receive if cu
Class	A Certificate 🗌 Al	ternate Route 🔲 SL	EO II 🔲	
Signa	ature of applicant made	in the presence of the	e Date	
	er accepting the applic			

## PERSONAL DATA

(	What is your full name:		
	state.		been known by and give the reason. If none
Ţ	Where were you born?		
]	Date of birth:		
			is country?
]	How long have you reside	d at your curre	ent address?
-	Telephone number:		Cell number:
	In chronological order, staten (10) years beginning w		ery place in which you have lived during the j nt address.
1	From	То	Address (Street, City, State, Zip Code)

10. The Shrewsbury Borough Police Department has a policy prohibiting tattoos that are offensive or inappropriate in nature. Can you comply with this order?

Yes:\_\_\_\_\_ No:\_\_\_\_\_

### SOCIAL STATUS

Law enforcement is a public service profession. Public confidence is a high priority. For this reason, the Shrewsbury Borough Police Department will conduct a confidential criminal check on your immediate family members.

11. Marital status:

Single	Married	Divorced	Separated	Engaged	Widowed/Widower

12. Give the name of your father, mother (maiden name), siblings, spouse, ex-spouse and children. (If deceased, so indicate)

Name	Address	Phone (Home & Cell)	Age
		H-	-
Father:		<u> </u>	
Mother:			
<u>Sibling:</u>			
<u>Sibling:</u>			
<u>Sibling:</u>			
Sibling:			
Spouse:			
Ex-Spouse:			

13. List the name(s) of your significant other(s) and ex-significant other(s) for the past 5 years, if different than above.

N	ame	Address	Phone (Home/Cell)
			H-
Significant Other:			<u>C-</u>
Ex-Significant Oth	<u>er:</u>		
Ex-Significant Oth	er:		

14. List names of police officers employed within this county with whom you are socially or personally acquainted:

AME DEPARTMENT	
ist chronologically (most recent dates first) all Police Academy(s) you have a arrently attending:	or a
lass A Certificate 🗌 Alternate Route 🗌 SLEO II 📋 SLEO I 🔲	
cademy	
ddress	
ertificate received or pending Date of Graduation	
lass A Certificate 🗌 Alternate Route 🗌 SLEO II 🔲 SLEO I 🔲	
cademy	
ddress	
ertificate received or pending Date of Graduation	
lass A Certificate 🗌 Alternate Route 🗌 SLEO II 🔲 SLEO I 🔲	
cademy	
ddress	
ertificate received or pending Date of Graduation	

15.

16. List chronologically (most recent dates first) all high schools and colleges you have or are currently attending:

School		
Address		
Degree received/completed	Dates	GPA
School		
Address		
Degree received/completed	Dates	GPA
School		
Address		
Degree received/completed	Dates	GPA
Major	Total credits earned toward degree	

17. Please list all organizations, clubs or athletic teams you were involved with during high school or college. Include the year(s) of participation:

It is understo to the Shrew Yes	ood I will imm vsbury Boroug	ediately have transcrip	
Proper fee n		h Police Department. No	ots from all high schools and colleg
	nust be forwar	ded to the school by the	ne applicant.
		MILITARY SER	VICE
Have you ev	ver served in a	n active military organ	nization?
Yes	No	Lo	cation
Give Branch	n of Service:		
Military Spe	ecialty:		
Rank held:_			
Service Seri	al Number:		
List all med	als and decora	tions awarded to you	as a member of the armed forces:
			es, or were you the subject of a subject of
Yes:	No:	Nu	mber of times:
lf yes, give	details of char	ges, agency concerned	l, dates and dispositions.

24. Are you now or were you ever an active or inactive member of the Reserve Force (any branch) of the United States, or the National Guard of any state: Yes: \_\_\_\_No: \_\_\_\_

Active or Inactive:	Branch:
Regiment:	_Unit:
Rank:	_Address:
From:	То:

#### EMPLOYMENT

25. Chronologically (most recent dates first) list each and every place you were employed since the age of 18. Omit none. Give correct, full address. Give dates of idleness between periods of employment in proper sequence. Include part-time employment.

Employer		
Address		
	Phone Number	
From (mm/dd/yy)	To (mm/dd/yy)	Immediate Supervisor
Job Description		
Reason for leaving		
Employer		
Address		
	Phone Number	
From (mm/dd/yy)	To (mm/dd/yy)	Immediate Supervisor
Job Description		
Reason for leaving		

Address			
		Phone Number	
From (mm/dd/yy)	To (mr	n/dd/yy)	Immediate Supervisor
Job Description			
Reason for leaving			
Are you now engaged member?	in any busines	s as an owner, a par	tner, a stockholder, or a c
Yes:	No:	If yes, give	details:
Were you ever discha Yes:	-		times:
If yes, give details:			
		nary action in conn	ection with any employm
	1.01		
Were you ever subjec Yes:			

28. 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:

Have you or your spouse ever possessed a professional or occupational license, per certification: Yes: No: If yes, give details:   Has any license or permit (excluding driver's license or learner's permit) issued city, state, or federal agency ever been denied to you, your spouse or to any corpora partnership of which you or your spouse was an officer, revoked, cancelled, or susper Yes:   If yes, give details:   Have you ever sponsored, vouched for, served as a character witness for, or ma recommendations for or concerning any person or premises to any municipal, st federal agency in connection with the issuance, revocation, or suspension of any lice	Yes:	No:	If yes, give details:
city, state, or federal agency ever been denied to you, your spouse or to any corpora partnership of which you or your spouse was an officer, revoked, cancelled, or suspon Yes:	Have you or y certification: `	/our spouse ever poss Yes:	sessed a professional or occupational license, per No:If yes, give details:
recommendations for or concerning any person or premises to any municipal, st federal agency in connection with the issuance, revocation, or suspension of any lice	city, state, or f partnership of Yes:	federal agency ever b which you or your sp No:No:No:No:	been denied to you, your spouse or to any corpora pouse was an officer, revoked, cancelled, or susp
permit or for any other reason?	recommendati federal agency	ions for or concerning in connection with t	ng any person or premises to any municipal, st

	Date	Present Status
Do you have incom	e from any other source?	Yes: No:
	e from any other source?	
If yes, give details:_		
If yes, give details:_ How much		Source
If yes, give details:_ How much Do you own any rea	How often	Source
If yes, give details:_ How much	How often	Source
If yes, give details:_ How much Do you own any rea	How often	Source
If yes, give details:_ How much Do you own any rea	How often	Source
If yes, give details:_ <u>How much</u> Do you own any rea <u>Value</u>	How often	Source

32. List all Police Agencies that you have previously filed an application for employment?

# ARRESTS, SUMMONSES, ETC.

Yes:	No:	If yes, give details:	
Date	Violation	Location	Disposition
before any	municipal, state		ested, or otherwise required t mittee, or other investigative l ails:
		summons for violation of If yes, give details:	`the fish and game laws?
Date	Violation	Disposition	Police Agency Involved
Have you	ver been arreste	d for or charged with a d	isorderly persons offense or m
Have you o ordinance?		ed for, or charged with a d No: If yes, g	isorderly persons offense or m give details:

10	•	4 . •4
It ves	oive.	details:
II <i>j</i> 00,	51.6	actumb.

nave je	ever had a crimir	nal arrest record	expunged? Yes	5:	No:
f yes, giv	e details:				
Have yo	ı ever been held as		less? Yes:		
	e details:				
	ever been invest on other than a law				
lf yes, giv	e details:				
			de present applic		

### **SUBVERSIVE AFFILIATIONS**

- 48. Are you now, or have you ever been, affiliated or associated with any of the organizations or groups described in question 47? Yes: \_\_\_\_\_ No: \_\_\_\_\_
- 49. 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 group described in question 47?

Yes: \_\_\_\_ No:\_\_\_\_

50. Have you ever signed or solicited others to sign any petition sponsored or issued by any organization or group described in question 47, or any petition which has as its purpose the aiding of any person, cause, or program connected in any way with the organizations or groups described in question 47?

Yes:\_\_\_\_\_ No:\_\_\_\_\_

- 51. 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 sponsored or organized by any organization or group described in question 47? Yes: <u>No:</u>
  - B. Payment or collection of any money, dues, contributions, or donations to any organization or group described in question 47? Yes: No:
  - C. Sale or distribution of any written or printed matter prepared, reproduced, or published by any organization or group described in question 47? Yes: \_\_\_\_\_ No: \_\_\_\_\_
  - D. Purchased or subscribed to any publication or periodical prepared, reproduced, or published by any organization or group described in question 47 or by any of its agents?Yes\_\_\_\_\_ No:\_\_\_\_\_
- 52. If you answered yes to any of the above questions, give details:

# MOTOR VEHICLE HISTORY

NJ D1	rivers License Number:	Expiration:
53.	Was your motor vehicle Yes: No:	registration or driver's license ever revoked or suspended?
	If yes, give details:	
54.	1	3 is yes, was such registration or driver's license ever restored? If yes, give details:
55.	Have you ever received a any other state, excluding	summons for any violation of the motor vehicle laws in this or parking violations?
	Yes: No:	If yes, give details:
56.	Do you possess a valid ope	erator's license any other state?
	Yes: No:	If yes, give details:
	State	Expiration Date
	Number	Туре

# **OTHER INFORMATION**

•	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 fitness for this position, including but not limited to, knowledge or information concerning your character, temperance, habits, associations, criminal records, traffic violations, residence or otherwise?					
	Yes:	No:	If yes, give details:			

### VOUCHERS

Upon completion of this form, the applicant must obtain three reputable citizens 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 therein 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.

Name:					
Telephone <u>: (H</u>	) <u>(</u> W)	Cell	Date of Birth:		
How long have you personally known the applicant:					
Is the applicant of	of good character and	d reputation:			
Signature:			Date:		
Name:					
	) (W)		Date of Birth:		
How long have you personally known the applicant:					
Is the applicant of	of good character and	d reputation:			
Signature:			Date:		

Name:				
Address:				
Telephone: (H) (W) Cell	Date of Birth:			
How long have you personally known the applicant:				
Is the applicant of good character and reputation:				
Signature:	Date:			
Name:				

NAME:

I hereby declare the information provided by me in this application is true and complete and I understand that falsification of this information is grounds for refusal to hire or, if hired, termination.

I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subject covered by this application and I release all such parties from all liability for any damage which may result from furnishing such information to you.

In consideration for my employment by the Borough of Shrewsbury, I agree to conform to the rules and regulations of the Borough of Shrewsbury and acknowledge these rules and regulations may be changed, interpreted, withdrawn or added to by the Borough of Shrewsbury at any time, at the Borough of Shrewsbury sole option as set forth in the Borough of Shrewsbury personnel policy or negotiated agreement with the Borough of Shrewsbury.

## NOTARIZATION

I, \_\_\_\_\_\_, being duly sworn, depose and say, am the above named person. I signed the foregoing statement. I have personally read and completed the 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

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_

Notary Public Commissioner of Deeds

My Commission Expires On

# **AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION**

I, \_\_\_\_\_, do hereby authorize a review of and full disclosure of all records concerning myself to any duly authorized agent of the Borough of Shrewsbury Police Department, Recruitment and Personnel Section, whether the said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records of education institutions: financial or credit institutions, including records of loans, the records of commercial or retail credit agencies (including credit reports and/or ratings); and other financial statements and records wherever filed; medical and psychiatric treatment and/or consultation, including hospitals, clinics, private practitioners, and the U.S. Veteran's Administration; employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me and the records and recollections of attorney at law, or of other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, or have had an interest.

I understand that any information obtained by a personal history background investigation which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment by the Borough of Shrewsbury Police Department. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information; and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

A photocopy of this release form will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

Signature (includ	le maiden name)
Address	
Phone:	
DOB:	SSN: