

NEPTUNE TOWNSHIP POLICE DEPARTMENT

APPLICATION FOR EMPLOYMENT

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 Jailor

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

PERSONAL INFORMATION						
NAME (Last, First, Middle)			Date of Birth			
D . A			Carlotte de N	1		
Driver's License Number/State			Social Security Nu	mber		
Primary Phone #	Email Address Height		Height	Weight		
Current Address		City				
Zip Code		Zip Code				
	QUESTI	ONNAIRE				
Your answers to these questions	s must be truthfu	ıl and accurate,	but will not			
immediately disqualify y	ou from employi	ment with the N	TPD.			
You must disclose all expunged records and conditional discharges.			charges.	Yes	No	
Are you a Citizen of the U.S.A?						
Do you possess a valid NJ Driver's License?						
Has any driver's license issued to you ever been suspended or revoked?						
Do you possess a high school diploma	or GED?					
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 Ch	ief's of Police wr	itten & physica	l exam, and are you			
currently on an active list?						
Are you fluent in any languages beside	s English?					
Do you have any tattoos that are exposed when wearing a long-sleeve shirt?						
Have you ever been arrested or convicted of a crime?						
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 States citizenship?						
If you were offered the positi	on of Police Offic	cer, SLEO I, II, o	r III would you be ab	le to:		
Work rotating shifts? (including overnight)						
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 p	oursuant to depa	rtment regulati	ons?			
Carry and use a firearm pursuant to reg	gulations includir	ng the use of de	adly force to			
defend your life or the life of another?						

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			EDUCATIO	N		
	T		Years	F1.11 4.5. 1		e or Degree,
	Institution Name		Attended	Field of Study	Total Cr	edits Earned
High School						
College/University						
Business/Technical						
Additional/Other						
		EN	APLOYMENT H	ISTORY		
List most recent employment first, including summer or temporary jobs, and any military service.						
Employer name and address:		Position title/duties, skills:			Start date:	End date:
					Reason for I	eaving
Supervisor:						
Telephone: Employer name and a	a d dwagge	Desition title/	dution abillar		Start date:	End date:
Employer name and a	auuress:	Position title/o	uuties, skiiis:		Start date:	End date:
					Reason for l	eaving
Supervisor:						
Telephone:						
Employer name and a	address:	Position title/o	duties, skills:		Start date:	End date:
r J						
				Reason for leaving		
Supervisor:						
Telephone:						
Employer name and a	address:	Position title/o	duties, skills:		Start date:	End date:
					Reason for leaving	
Supervisor:						
Telephone:						
Employer name and a	address:	Position title/o	duties, skills:		Start date:	End date:
I osition titt/utites, skins.						
				Reason for l	eaving	
G						
Supervisor:						
Telephone:						

Enter any additional information here:

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SKILLS AND QUALIFICATIONS				
List any relevant certifications or professional licenses held (EMT, HazMat Technician, Firefighter etc):				
I is to the second sections		REFERENCES		
Name	nces who are not relatives or Address	Telephone	Occupation	Years Known
			_	
Name	Address	Telephone	Occupation	Years Known
Name	Address	Telephone	Occupation	Years Known
	NHOPM			
As nort of our proceeds		TION TO THE APPLICAN		laxmant references
		nployment application, your pomitted any facts on this appl		
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.				
37 '11 1 ' 1 4	. 1 1:41 4:		4. 4 1.	at TT 'a 1
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.				
		\mathcal{S}		
	O 4 14 W1 1	1 ' 11 C	1 11 4 1	A CC 4:
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				
	on your application for en		1	1
<u> </u>				
Signature of Appli	cant	Date		

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

Phone: 732-988-800 Fax: 732-988-8442



APPPLICANT INFORMATION RELEASE FORM

Name:	Address:
Social Security #:	Date of Birth:
To all Courts, Probation Departments, employers, educational and other institutions	Selective Service Boards, physicians, hospitals, s and agencies without exception:
determine my eligibility. Therefore, you	, am making an application for employment to the As a result, an investigation is being conducted to are authorized to release to the Neptune Township any and all information, documentary or otherwise, one that they may request.
and any representatives and any persons fevery nature and kind arising out of furni	he Neptune Township Police Department, its agents furnishing information from any and all liability of ishing, inspection or collection of such documents, restigation made by the Neptune Township Police
A copy of this authorization will be o	considered as effective and valid as the original.
Signed:	Date:
Witness:	Date:
Notary:	Date:
My commission expires:	

NOTARY

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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) Appli	ed For:			
Referral Source:				
☐ Advertisement ☐ Friend ☐	Relative □ Walk-in □ Newspaper			
☐ Employment Agency ☐ Neptune Police Website ☐ Social Media ☐ Other				
Gender: ☐ Male ☐ Female ☐ X o	r Non-Binary			
Ethnicity:				
Are you Hispanic or Latino?				
☐ No, I am not Hispanic 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	ng categories(s):			
☐ American Indian / Alaskan Native	☐ White			
☐ Asian ☐ Two or More Races				
☐ Black or African American ☐ Other				
☐ Native Hawaiian or Other Pacific Isla	ander			
Do you identify as LGBTQ+: ☐ Yes ☐	□ No			
FOR PERSONNEL D	EPARTMENT USE ONLY			
Position(s) Applied For Is Open:	□ No Date:			
Position(s) Considered For:				

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