



## BERKELEY HEIGHTS POLICE DEPARTMENT

### RELEASE AUTHORIZATION

To whom it may concern:

I, \_\_\_\_\_, have made application to the Berkeley Heights Police Department. As this position will involve the handling of sensitive and confidential information, the department needs to thoroughly investigate my employment background and personal history to evaluate my qualifications for the position to which I have applied.

I therefore authorize you to release any and all information relating to my employment or otherwise pertaining to me to the Berkeley Heights Police Department, or its representative, regardless of any contrary agreement I may have previously made with you.

I hereby release you, your organization, and all others from liability or damages that may result from furnishing the information requested, including liability or damage pursuant to any state or federal laws.

I hereby release, discharge and/or exonerate the Berkeley Heights Police Department, its agents and representatives, and any person so furnishing the information requested from any liability of any nature and kind, arising out of the furnishing, inspection or collection of such documents, records and other information or the investigation conducted by the Berkeley Heights Police Department.

A photocopy of this document will be considered as effective and valid as the original.

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town, State, Zip Code: \_\_\_\_\_

Signature: \_\_\_\_\_

#### To be completed by a Notary Public:

Subscribed to me this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
Notary Public, State of New Jersey



**Employment Application  
Berkeley Heights Police Department**

Page 1

LAST NAME			FIRST NAME		MIDDLE NAME		SOCIAL SECURITY NUMBER	
ALIAS(ES), NICKNAME(S), MAIDEN NAME, OTHER CHANGES IN NAME							HOME PHONE #	
PRESENT ADDRESS: NUMBER, STREET, PO OR RFD, CITY, STATE, ZIP CODE								
DATE OF BIRTH: (MONTH/DAY/YEAR)					PLACE OF BIRTH: (PROVIDE PROOF OF BIRTH)			
HEIGHT		WEIGHT		EYE COLOR		HAIR COLOR		SCARS, MARKS, TATTOOS
U. S. CITIZEN			NATIVE			IF NATURALIZED, CERTIFICATE NO. _____		
Yes ( )		NO ( )		Yes ( )		NO ( )		IF DERIVED, PARENTS CERT. NO. _____
DATE, PLACE AND COURT								

MARRIAGE STATUS: SINGLE    MARRIED    SEPARATED    DIVORCED    WIDOWED			
NAME OF FIANCEE: (If applicable)		ADDRESS: (Street, City, State, Zip Code)	
INFORMATION CONCERNING MARRIAGES:			
WHEN	WHERE	WHO OFFICIATED	SPOUSE'S MAIDEN NAME
NAME AND PRESENT ADDRESS OF SPOUSE(S) IF DIVORCED OR SEPARATED			
NAME		ADDRESS	
IF EVER SEPARATED, ANNULLED, OR DIVORCED, INDICATE BELOW THE FOLLOWING:			
SEPARATED, ANNULLED OR DIVORCED (State Which)	DATE OF ORDER OR DECREE	BY WHOM	WHERE ISSUED (Court & State)



**Employment Application**  
**Berkeley Heights Police Department**  
**Page 2**

**CHILDREN AND DEPENDENTS:** List all, including stepchildren and adopted.

NAME	BIRTH		RESIDENCE	
	DATE	PLACE	ADDRESS	LIVES WITH

**OTHER DEPENDENTS:** ( If you claim income tax exemption for support).

NAME	ADDRESS	RELATIONSHIP	% SUPPORT

**MILITARY STATUS:**

Have you ever served in the U.S. Armed Forces? Yes. ( ) No. ( )

**IF YES WHAT BRANCH:** (Attach a copy of Discharge or DD Form 214.)

A. While in the military service were you ever arrested for an offense which resulted in office hours, summary, special or general court-martial?  
 If yes, give date, place law enforcing authority or type of court-martial charge and action taken for each incident, using separate sheet to record this information.

B. Are you presently a member of a U.S. Reserve or National Guard Unit?  
 Yes. ( ) No. ( ) If yes, complete the following:

GRADE AND SERVICE NO.	SERVICE AND COMPONENT		
ORGANIZATION AND STATION OR UNIT AND LOCATION	ACTIVE	INACTIVE	STANDBY
SELECTIVE SERVICE NUMBER:	CURRENT CLASSIFICATION	DATE CLASSIFIED	

**TECHNICAL MILITARY SCHOOLS OR SKILLS ATTENDED OR ACQUIRED:**



**Employment Application**  
**Berkeley Heights Police Department**  
 Page 3

**EDUCATION:**

List all elementary, junior high, and high schools attended.

NAME OF SCHOOL	LOCATION	DATES	YEARS	GRADUATED?	
		ATTENDED	COMPLETED	YES	NO

HIGHER EDUCATION: List below all colleges or universities attended.

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	DATES ATTENDED		CREDIT HOURS	DEGREE	YEAR RECEIVED
	FROM	TO	SEMESTER QUARTER	RECEIVED	

MAJOR AND MINOR COLLEGE COURSES TAKEN:

--

OTHER SCHOOLS / SPECIALIZED TRAINING OR CERTIFICATIONS (MILITARY, POLICE, BUSINESS, TRADE).

--

**FOREIGN LANGUAGE(S):**

Enter foreign language and indicate your fluency.

LANGUAGE	READING	SPEAKING	UNDERSTANDING	WRITING
	EXC. - GOOD - FAIR	EXC. - GOOD - FAIR	EXC. - GOOD - FAIR	EXC. - GOOD - FAIR

FOREIGN TRAVEL: Exclude trips of less than 30 days to Canada or Mexico and foreign travel as a direct result of U.S. Military duties.

DATES		COUNTRY VISITED	PURPOSE OF TRAVEL
FROM	TO		



**Employment Application**  
**Berkeley Heights Police Department**  
 Page 4

**REFERENCES:**

**CREDIT AND CHARACTER REFERENCES:** (Do not include relatives, former employers, or persons living outside the United States or its Territories) List only character references who have definite knowledge of your qualifications and fitness for the position for which you are applying. **Only two of your references may be from Law Enforcement.** Do not repeat names of supervisors.

**CHARACTER REFERENCES:** List (5) Five.

	NAME	YEARS KNOWN	ADDRESS: (Business Address Preferred)		
			STREET	CITY	STATE
1.					
2.					
3.					
4.					
5.					

**CREDIT REFERENCES:** List (3) Three.

1.		
2.		
3.		

**VEHICLE OPERATOR'S LICENSE**

Give the following information concerning any vehicle operator's license you have held or now hold from any state.

LICENSE NUMBER	STATE OF ISSUE	DATE OF EXPIRATION	RESTRICTIONS

Have you ever been denied issuance of a license or have you ever had a license suspended or revoked for any reason? Yes. ( ) No. ( )  
 If yes, explain fully;



Employment Application  
Berkeley Heights Police Department  
Page 5

**AUTOMOBILE INSURANCE:**

Give name and address of the insurance company with whom you now have automobile insurance. Policy Number:

**SPECIAL QUALIFICATIONS AND SKILLS:**

Indicate special skills you possess such as computer or typing knowledge, radio or pilot licenses with dates issued, or any other special interest that you believe would enhance your value to the police department.

**FAMILY:**

List in the order given, showing relationship, parents, guardians, stepparents, foster parents, parents-in-law, brothers, and sisters, even though deceased. Include any others you have resided with or with whom a close relationship existed or exists.

RELATIONSHIP	NAME	PRESENT ADDRESS, IF LIVING
FATHER		
MOTHER (Maiden Name)		



**Employment Application**  
**Berkeley Heights Police Department**  
 Page 6

<b>EMPLOYMENT:</b>			
Begin with your most recent job and list your work history for the past ten (10) years, including part-time, temporary or seasonal employment, and all periods of unemployment.			
FROM DATE	NAME AND ADDRESS OF EMPLOYER	WHY WOULD YOU LEAVE	BUSINESS PHONE #
TO PRESENT		DESCRIPTION OF YOUR DUTIES	
SALARY		NAME OF SUPERVISOR	
FROM DATE	NAME AND ADDRESS OF EMPLOYER	WHY DID YOU LEAVE	BUSINESS PHONE #
TO DATE		DESCRIPTION OF YOUR DUTIES	
SALARY		NAME OF SUPERVISOR	
FROM DATE	NAME AND ADDRESS OF EMPLOYER	WHY DID YOU LEAVE	BUSINESS PHONE #
TO DATE		DESCRIPTION OF YOUR DUTIES	
SALARY		NAME OF SUPERVISOR	
FROM DATE	NAME AND ADDRESS OF EMPLOYER	WHY DID YOU LEAVE	BUSINESS PHONE #
TO DATE		DESCRIPTION OF YOUR DUTIES	
SALARY		NAME OF SUPERVISOR	
FROM DATE	NAME AND ADDRESS OF EMPLOYER	WHY DID YOU LEAVE	BUSINESS PHONE #
TO DATE		DESCRIPTION OF YOUR DUTIES	
SALARY		NAME OF SUPERVISOR	



**Employment Application**  
**Berkeley Heights Police Department**  
**Page 7**

<b>EMPLOYMENT: Continued...</b>			
FROM DATE	NAME AND ADDRESS OF EMPLOYER	WHY DID YOU LEAVE	BUSINESS PHONE #
TO DATE	DESCRIPTION OF YOUR DUTIES		
SALARY	NAME OF SUPERVISOR		
FROM DATE	NAME AND ADDRESS OF EMPLOYER	WHY DID YOU LEAVE	BUSINESS PHONE #
TO DATE	DESCRIPTION OF YOUR DUTIES		
SALARY	NAME OF SUPERVISOR		
FROM DATE	NAME AND ADDRESS OF EMPLOYER	WHY DID YOU LEAVE	BUSINESS PHONE #
TO DATE	DESCRIPTION OF YOUR DUTIES		
SALARY	NAME OF SUPERVISOR		
FROM DATE	NAME AND ADDRESS OF EMPLOYER	WHY DID YOU LEAVE	BUSINESS PHONE #
TO DATE	DESCRIPTION OF YOUR DUTIES		
SALARY	NAME OF SUPERVISOR		
HAVE YOU EVER BEEN DISCHARGED, ASKED TO RESIGN, FURLOUGHED, OR PUT ON INACTIVE STATUS FOR CAUSE, OR SUBJECTED TO DISCIPLINARY ACTION WHILE IN ANY POSITION? Yes. ( ) No. ( )			
If yes, state circumstances below: <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div>			
HAVE YOU EVER RESIGNED (QUIT) AFTER BEING INFORMED YOUR EMPLOYER INTENDED TO DISCHARGE (FIRE) YOU FOR ANY REASON? Yes. ( ) No. ( )			
If yes, state circumstances below: <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div>			





**Employment Application**  
**Berkeley Heights Police Department**  
**Page 8**

<b>SUBSTANCE USE:</b>		
Do you drink alcoholic beverages? How often?	Yes. ( )	No. ( )
Have you ever used illegal drugs or substances? If you answered yes, please describe:	Yes. ( )	No. ( )
Have you ever taken prescription medication not prescribed to you?	Yes. ( )	No. ( )

<b>PAST OR PRESENT MEMBERSHIP IN ORGANIZATIONS:</b>				
NAME AND ADDRESS	TYPE (Social, Fraternal)	OFFICE HELD	MEMBERSHIP	
			From	To

<b>HOBBIES AND SPORTS</b>		
TYPES OF SPORT/ HOBBIE	LENGTH OF PARTICIPATION	LEVEL OF PROFICIENCY

<b>ARREST, DETENTION, AND LITIGATION</b>
A. Have you ever been detained or arrested by a law enforcement agency?  YES. ( )                      NO. ( )
If yes to above, describe circumstances giving dates and locations



Employment Application  
Berkeley Heights Police Department  
Page 9

**COURT ACTION - CIVIL OR CRIMINAL:**

A. Have you, or your spouse, been involved in any court action, civil or criminal? Include all traffic violations in NJ and elsewhere.

YES. ( ) NO. ( )

If yes to above, describe circumstances giving dates and locations:

B. Have you, or your spouse, ever been the target of a police investigation in NJ or elsewhere?

YES. ( ) NO. ( )

If yes to above, describe circumstances giving dates and locations:

**FINGERPRINTING:**

A. Have you ever been fingerprinted for any reason? Include any arrests, job applications or security clearances.

YES. ( ) NO. ( )

If yes to above, describe circumstances giving dates and locations

**FINANCIAL STATUS: You must provide a copy of your Credit Report with your completed application.**

A. Do you derive income from any other source other than your principal occupation? Yes. ( ) No. ( ) How much?

What is the source?

B. Do you own any bonds, government or other? Yes. ( ) No. ( )

Value:

C. Do you own any stocks? Yes. ( ) No. ( )

Value:

D. Do you have a bank account? Savings ( ) Checking ( )

Approximate amount:

Name of Bank:

E.. Do you own any real property? Yes. ( ) No. ( )

Value:

Location:



**Employment Application**  
**Berkeley Heights Police Department**  
 Page 10

**FINANCIAL OBLIGATIONS:**

GIVE NAMES AND ADDRESSES OF THE INDIVIDUAL, COMPANIES, OR OTHERS TO WHOM YOU ARE INDEBTED AND THE EXTENT OF YOUR DEBT. (INCLUDING ANY LOANS ON WHICH YOU ARE THE CO-MAKER).

NAME AND ADDRESS OF CREDITOR	KIND OF DEBT	AMOUNT

**SUBVERSIVE ORGANIZATIONS:**

If YES to any of the answers below, describe the circumstances. Attach additional sheets for a full detailed statement. If associated with any of the below organizations, specify the nature and extent of the association. If associations have been with individuals who are members of these organizations, then list the individuals and the organization with which they were or are affiliated.

YES	NO	
		Are you now or have you ever been a member of any type of subversive group or organization.
		Are you now or have you ever been a member of any organization, association, movement, group or combination of persons which advocates the overthrow of our constitutional form of government, or which has adopted the policy of advocating or approving the commission of acts of force or violence to deny other persons their rights under the Constitution of the United States or which seeks to alter the form of government of the United States by unconstitutional means?
		Are you now or have you ever been affiliated or associated with any organization of the type described above, as an agent, official or employer?
		Have you ever donated to or participated with any of the above organizations?



Employment Application  
Berkeley Heights Police Department  
Page 11

**OTHER AGENCIES:**

Have you ever applied for a position with any other governmental agency?

YES. ( )

NO. ( )

If yes, give details below:

Have you submitted any other applications for employment with other police agencies?

YES. ( )

NO. ( )

What is the status of your application(s) Describe:

**LIST ALL SOCIAL NETWORKING SITES YOU PARTICIPATE IN: (Facebook, Twitter, Instagram, MySpace, or any others)**

**I CERTIFY THAT THERE ARE NO MISREPRESENTATIONS, OMISSIONS, OR FALSIFICATIONS IN THE FOREGOING STATEMENTS AND ANSWERS, AND THAT THE ENTRIES MADE BY ME ABOVE ARE TRUE, COMPLETE, AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AND ARE MADE IN GOOD FAITH.**

**I FURTHER AGREE AND CONSENT IN ADVANCE TO BEING SUMMARILY DISCHARGED WITHOUT CAUSE OR HEARING IF ANY OF THE ABOVE INFORMATION CONTAINS ANY MISREPRESENTATION OR FALSIFICATION OR IF ANY MATERIAL INFORMATION HAS BEEN OMITTED.**

\_\_\_\_\_  
(Signature of Applicant)

\_\_\_\_\_  
(Date)