# Gloucester Township Police Department Support Personnel

## Employment Application

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**Name:**  
**Position:**  
**Date:**  

Investigator's Initials ____________  Applicant's Initials ____________

(1)
A. PERSONAL DATA

Attach photo here>

1. Full Name
   Last Name          First Name          Middle Name

2. Give any other names you have used or been known by:

3. Place of Birth
   City            State            County            Zip Code

4. Date of Birth
   Month          Day            Year

5. Height     Weight          Eyes          Hair

6. Social Security Number

7. Home Phone          Cellular Phone
  Work Phone          E-Mail Address

Investigator’s Initials ____________  Applicant’s Initials ____________

(2)
B. CITIZENSHIP

1. Are you a native born citizen or naturalized citizen?

2. If you are of foreign birth, or are a naturalized citizen, complete the following:
   a. Country of Birth
   b. If you are a naturalized citizen, name and address of person who sponsored you upon arrival
   c. First address after arrival
   d. How did you obtain citizenship?
   e. Petition Number Date Court State Certificate Number

C. SOCIAL STATUS

1. Name of Spouse, Fiancé, Significant Other, Life Partner, or Dating Partner:

2. If married, When: ___________________________ Maiden Name:

3. Were you ever divorced or had a marriage annulled? ________________

4. If divorced or annulled, Date: ___________ Reason:

6. Has your spouse, fiancé, significant other, life partner, or dating partner ever contacted the police in reference to you for any reason? ______ If yes, provide dates, reasons, agency, and disposition

6. Has your spouse, fiancé, significant other, life partner, or dating partner ever been arrested, interviewed, detained, or convicted by any law enforcement agency? ______ If yes, provide dates, reasons, agency, and disposition

Investigator's Initials ______________________ Applicant's Initials ______________________

(3)
C. SOCIAL STATUS (CONTINUED)

7. List all children and dependants:

Name: ___________________ Age: ___ Relationship: ___________________________
Current Address: ____________________________________________________________
_________________________________________________________________________

Name: ___________________ Age: ___ Relationship: ___________________________
Current Address: ____________________________________________________________
_________________________________________________________________________

Name: ___________________ Age: ___ Relationship: ___________________________
Current Address: ____________________________________________________________
_________________________________________________________________________

Name: ___________________ Age: ___ Relationship: ___________________________
Current Address: ____________________________________________________________
_________________________________________________________________________

8. Are you now supporting all children, including adopted and step-children? ________

9. Are you obligated by court order to pay support for your children? ________

11. Is there currently or has there ever been a judicial order issued ordering you to pay
arrears in child support? ________ If yes, state full details __________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

Data of Former Spouse (If applicable)

12. Name: ___________________ Date of Birth: ________________________________
Present Address: __________________________________________________________
Phone Number: ___________________ Business Number:______________________
Occupation: ____________________________________________ Employer:__________
_________________________________________________________________________

Investigator’s Initials ___________________ Applicant’s Initials ___________________
C. SOCIAL STATUS (CONTINUED)

13. Was your former spouse ever arrested, interviewed, detained, or convicted by any law enforcement agency? _____ If yes, provide dates, reasons, agency, and disposition.

14. Did your former spouse ever contact the police in reference to you for any reason? _____ If yes, provide dates, reasons, agency, and disposition.

15. Have you been the defendant or plaintiff of a final restraining order, temporary restraining order, ex parte or protection order? _____ If yes, provide dates, reasons, agency, and disposition.

16. Have the police ever been called to any home/residence in which you have resided? _____ If yes, provide dates, reasons, agency, and disposition.

Family Information

17. List: Father, Mother, Sisters/Brothers, Step-Father, Step-Mother, and Step-Brothers/Sisters:
   a. Name and Relationship:
      Address:
      Phone Number:

   b. Name and Relationship:
      Address:
      Phone Number:

   c. Name and Relationship:
      Address:
      Phone Number:


Investigator's initials ____________________ Applicant's Initials ____________________

(5)
C. SOCIAL STATUS (CONTINUED)

Family Information Continued

d. Name and Relationship:  
   Address:  
   Phone Number: 

e. Name and Relationship:  
   Address:  
   Phone Number: 

f. Name and Relationship:  
   Address:  
   Phone Number: 

20. Have any members of your family (including in-laws) or members of your household ever been arrested for any reason other than traffic violations, or undergone any type of investigation by any agency, or subpoenaed by any Grand Jury or investigating body?  
   If yes, explain, including the name of the individual, relationship, date, location, charges, and final disposition. 

21. List the name and agency of any relatives employed in law enforcement:  
a. Name:  
   Agency:  
   Phone  
   Address:  

b. Name:  
   Agency:  
   Phone  
   Address:  

c. Name:  
   Agency:  
   Phone  
   Address:  

Investigator’s Initials ___________________ Applicant’s Initials ___________________
D. RESIDENCE

1. Where do you now reside? ____________________________________________

   Phone number _______________________________________________________

2. How long have you resided there? _____________________________________

3. If you reside with someone other than spouse or parent(s), list:

   a. Name   Relationship   Social Security No.   Date of Birth
   ________________________________________________________________
   b. Name   Relationship   Social Security No.   Date of Birth
   ________________________________________________________________

4. In chronological order (start with the most recent), list every place in which
   you have resided since birth:

   a. Address:
      Town/City: ___________________________ County: __________ State: ______
      From ______________ to ______________
   b. Address:
      Town/City: ___________________________ County: __________ State: ______
      From ______________ to ______________
   c. Address:
      Town/City: ___________________________ County: __________ State: ______
      From ______________ to ______________
   d. Address:
      Town/City: ___________________________ County: __________ State: ______
      From ______________ to ______________
   e. Address:
      Town/City: ___________________________ County: __________ State: ______
      From ______________ to ______________

Investigator’s Initials ___________________________ Applicant’s Initials ________
D. RESIDENCE (CONTINUED)

5. If residing with someone, have they ever been arrested, interviewed, detained, or convicted by any law enforcement agency? ______ If yes, provide, dates, reasons, agency, and disposition.

6. Has the person you reside with ever contacted the police in reference to you for any reason? ______ If yes, provide, dates, reasons, agency, and disposition.

7. List all places you are registered to vote (if none, so state):
   a. County: ___________________ State: ___________________ Year: __________
   b. County: ___________________ State: ___________________ Year: __________

8. If you are not registered to vote, explain why:

E. EDUCATION

Education
High Schools/Vocational Schools Attended

Upon my receipt of this questionnaire, I will IMMEDIATELY forward all transcripts from all schools, colleges, or universities attended to the: Gloucester Township Police Department, Criminal Investigations Unit, P.O. Box 8, Blackwood, NJ 08012

(List most recent attended first)

1. Name: ____________________________
   Address: ____________________________
   Phone Number: _______________________
   Dates Attended: From __________ to __________

2. Name: ____________________________
   Address: ____________________________
   Phone Number: _______________________
   Dates Attended: From __________ to __________

Investigator’s Initials ___________________ Applicant’s Initials ___________________

(8)
E. EDUCATION (CONTINUED)

College/Universities Attended

4. Do you possess a college/university degree? ____________________________

5. Type: AA_____ AS_____ BA_____ BS_____ MA_____ MS_____ Other____

6. If not, how many college credits have you earned? ____________________

7. Have you ever received a scholarship/grant? _________________________

8. What is/was your major field of study? ________________________________

9. What is/was your minor field of study? ________________________________

10. Do you currently have any outstanding debts with any colleges (deferred loans, tuition, grants, parking citations, lab costs, etc.)? _______ If yes, provide amount of debt and reason. ____________________________________________

Colleges or Universities Attended
(List most recent attended first)

11. Name: _____________________________________________________________
    Address: ____________________________________________________________
    Phone Number: ___________ Dates Attended: From __________ to __________
    Credits Earned: _______ Degree Earned: ___________ Final G.P.A. __________

12. Name: _____________________________________________________________
    Address: ____________________________________________________________
    Phone Number: ___________ Dates Attended: From __________ to __________
    Credits Earned: _______ Degree Earned: ___________ Final G.P.A. __________

Investigator’s Initials _______________ Applicant’s initials ________________

(9)
E. EDUCATION (CONTINUED)

13. Name: ________________________________________________

Address: ________________________________________________

Phone Number: ______ Dates Attended: From ______ to ______

Credits Earned: _____ Degree Earned: ______________ Final G.P.A. ________________

14. Have you ever been suspended, expelled, or placed on academic probation from any school or educational facility? ______ If yes, explain ________________________________

____________________________________________________________________________

____________________________________________________________________________

15. List any problems at school, including college (absenteeism, tardiness, failing grades.)
   a. School: _______________ Problem: ________________________________
   b. School: _______________ Problem: ________________________________

16. Have you ever been interviewed, detained, arrested, or had contacted with any college police agency? ______ If yes, explain ________________________________

____________________________________________________________________________

____________________________________________________________________________

Foreign Language Skills

17. Are you able to communicate in any language other than English (including sign language)? ______
   A. Language _______________ Fluency Level (Low □ Medium □ High □)
   B. Language _______________ Fluency Level (Low □ Medium □ High □)

Investigator’s Initials _______________________ Applicant’s Initials ________________________

(10)
F. EMPLOYMENT

Current Employer

1. Employer Name: __________________________ Phone Number: __________________________
   Address: __________________________
   Date Hired: __________________________ Supervisor: __________________________
   Duties: __________________________

2. Are you now engaged in any business as an owner (active or silent), partner, 
   Stockholder, or corporate member? _____ If yes, explain __________________________

Previous Employment

List below, starting with most recent, each place you were employed. Give full 
addresses and telephone numbers, including all part-time, unreported, and 
unclaimed employment:

3. Employer Name: __________________________ Phone Number: __________________________
   Address: __________________________
   Supervisor: __________________________ Reason for Leaving: __________________________
   Duties: __________________________

4. Employer Name: __________________________ Phone Number: __________________________
   Address: __________________________
   Supervisor: __________________________ Reason for Leaving: __________________________
   Duties: __________________________

5. Employer Name: __________________________ Phone Number: __________________________
   Address: __________________________
   Supervisor: __________________________ Reason for Leaving: __________________________
   Duties: __________________________

6. Employer Name: __________________________ Phone Number: __________________________
   Address: __________________________
   Supervisor: __________________________ Reason for Leaving: __________________________
   Duties: __________________________

Investigator’s Initials __________________________ Applicant’s Initials __________________________

(11)
F. EMPLOYMENT (CONTINUED)

If you answer “yes” to any of the below questions, give full details including circumstances in each case.

7. Have you ever been discharged/terminated/fired/ or disciplined by any employer? ________  
   If yes, explain ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

8. Have you ever been the subject of a citizen, client, or co-worker complaint? ________  
   If yes, explain ____________________________________________________________
   ____________________________________________________________

9. Have you resigned (quit) while anticipating that your employer intended to discharge (fire) you for any reason? ________  
   If yes, explain ____________________________________________________________
   ____________________________________________________________

10. Have you ever walked off (left) a job without giving proper notice? ________  
    If yes, explain ____________________________________________________________
    ____________________________________________________________

11. Have you ever resigned (quit) from a job by mutual agreement following allegations of unsatisfactory work performance? ________  
    If yes, explain ____________________________________________________________
    ____________________________________________________________

12. Have you ever stolen anything from any of your employers? ________  
    If yes, explain ____________________________________________________________
    ____________________________________________________________

13. Have you ever committed any other crimes (even of which was undetected) while on any job you ever held? ________  
    If yes, explain ____________________________________________________________
    ____________________________________________________________

14. Have you had any extended work absences for reasons other than medical or earned vacations? ________  
    If yes, explain ____________________________________________________________
    ____________________________________________________________

Investigator’s Initials ______________________  Applicant’s Initials ______________________

(12)
F. EMPLOYMENT (CONTINUED)

Unemployment

15. Have you ever received unemployment or other federal, state, or local benefits or assistance? If yes, provide Local Office:
   Type: ________________________________
   Address: ________________________________
   Give Periods: From: __________________ To: __________________
   From: __________________ To: __________________

16. Have you ever received any allowance to which you were not entitled? If yes, explain
   ________________________________
   ________________________________
   ________________________________

Law Enforcement Inquiries

17. Have you applied with any other Law Enforcement Agency? If yes, provide agency, date, and present status
   ________________________________
   ________________________________
   ________________________________

18. Have you ever been rejected by a Police Department or Law Enforcement Agency for employment? If yes, provide agency, date, and reason
   ________________________________
   ________________________________
   ________________________________

Investigator’s Initials ________________________________ Applicant’s Initials ________________________________

(13)
G. ORGANIZATION MEMBERSHIPS AND HOBBIES

List Current and Past Memberships to any Clubs, Societies, or Organizations that you have participated in:

1. Name: _______________________________ Type: _______________________________
   Date: From _______________ to _______________ Rank/Title __________________________

2. Name: _______________________________ Type: _______________________________
   Date: From _______________ to _______________ Rank/Title __________________________

3. Name: _______________________________ Type: _______________________________
   Date: From _______________ to _______________ Rank/Title __________________________

4. Name: _______________________________ Type: _______________________________
   Date: From _______________ to _______________ Rank/Title __________________________

5. Name: _______________________________ Type: _______________________________
   Date: From _______________ to _______________ Rank/Title __________________________

List All Hobbies and Past Time Activities

6. Hobbie/Activity __________________________ Years: ________ Level: __________________

7. Hobbie/Activity __________________________ Years: ________ Level: __________________

8. Hobbie/Activity __________________________ Years: ________ Level: __________________

9. Hobbie/Activity __________________________ Years: ________ Level: __________________

10. Hobbie/Activity __________________________ Years: ________ Level: __________________

Investigator’s Initials __________________________ Applicant’s Initials __________________________

(14)
H. MILITARY

1. Are you registered with the Selective Service System? ______________

2. Have you served in the Armed Forces of the United States? ______________
   If yes, Branch(es) of Service: ______________ Service Number: ______________

3. Dates of Service: From ____________ to ____________
   From ____________ to ____________

4. Type of Discharge: (Exclude Medical Reasons): ______________

5. Job Title and Rank at Time of Separation? ______________


7. Do you have current military reserve obligation: __________ If yes,
   Active __________ Inactive __________

8. Date Reserve Obligation started is scheduled to terminate:
   From: ____________ To: ____________

9. If you have a reserve obligation, provide you reserve organization’s
   Name and address below:
   Organization: ___________________________________________________________________
   Address: _______________________________________________________________________
   Supervisor: ______________ Business Phone: ______________

10. Were you ever subject to any type of disciplinary action (including Article 15’s)
    under the Uniform Military Justice while serving in the Armed Forces? ________
    If yes, describe in detail ___________________________________________________________________
    _______________________________________________________________________
    _______________________________________________________________________

11. Have you ever been denied/refused entrance to any U.S. Armed Forces? ________
    If yes, explain the basis for your denial _______________________________________________________________________
    _______________________________________________________________________

12. List all awards, medals, commendations, unit awards, operational awards, etc. you
    Received while serving in the military _______________________________________________________________________
    _______________________________________________________________________
    _______________________________________________________________________

Investigator’s Initials ___________________ Applicant’s Initials ___________________
I. CRIMINAL HISTORY

1. Have you ever been _______ "(check all that apply)" by any Law Enforcement Agency, College/University, or Campus Police?
   
   a. Arrested
   b. Interviewed
   c. Interrogated
   d. Detained
   e. Indicted
   f. Convicted
   g. Received a Criminal Summons
   h. Received a Civil Citation
   i. Received a Criminal Complaint Via Mail

   If checked, explain in detail, giving date, reason, agency, and disposition.

   ________________________________

   ________________________________

Are you currently:

2. Charged with a Criminal/Civil Offense or Juvenile Delinquency by any Law Enforcement Authority?

3. On Bail or out on Personal Recognizance or other conditional release for any Reason?

4. Probation or Parole of any type?
   If yes, explain in full detail.

5. Are you aware of any outstanding criminal/civil summons or warrants issued for your arrest? ______ if yes, explain in detail.

6. Have you ever assaulted anyone (i.e. fights, domestic violence)?
   If yes, explain in detail.

   ________________________________

   ________________________________

   ________________________________

Investigator's Initials ___________________ Applicant's Initials ___________________ (16)
I. CRIMINAL HISTORY (CONTINUED)

7. Have you ever been issued/served with any of the following:
   Bench Warrant ___________ Arrest Warrant ___________
   Criminal Complaint Summons/Warrant ___________
   Court papers for any type of court appearance ___________

   If checked, explain in detail providing the date, reason, agency, and disposition.

8. Have you ever been arrested for/or convicted of a criminal offense, include city Ordinance violations (i.e. Underage consumption, noise violation, violation of fish and game laws)?
   If yes, provide all details, giving dates, location, arresting agency, court disposition, etc.

9. Have you ever had any records expunged? _________ If yes, provide full details.

10. Have you ever used, ingested, experimented, tasted, and/or possessed any narcotics/controlled dangerous substance not prescribed by a physician?
    If yes, explain

11. Have you ever associated with, are related to, or had/have an ongoing friendship/ personal relationship with anyone you suspected or knew/know was/is a seller/distributor of narcotics/controlled dangerous substances?
    If yes, explain in full details

12. Have you ever been present when illegal drugs/narcotics/controlled dangerous substances were sold, used, possessed, or delivered? _________ If yes, provide full details

Investigator’s Initials ________________________ Applicant’s Initials ________________________

(17)
J. MOTOR VEHICLE AND LICENSE INFORMATION

1. List all motor vehicles currently owned and/or operated by you and your Spouse/fiancé:
   a. Make: _______ Model: _______ Tag: _______ State: _______
   b. Make: _______ Model: _______ Tag: _______ State: _______
   c. Make: _______ Model: _______ Tag: _______ State: _______
   d. Make: _______ Model: _______ Tag: _______ State: _______

2. Automobile Insurance Co.
   Policy# _______________ Agent: _______________ Phone _______________
   Address: __________________________________________

3. Has your license or privilege to operate a motor vehicle ever been refused, revoked, suspended, or cancelled for non-medical reasons? ________ If yes, explain in detail
   ______________________________________________________
   ______________________________________________________

4. Has your motor vehicle registration ever been refused, revoked, suspended, or cancelled for non-medical reasons? ________ If yes, explain in detail
   ______________________________________________________
   ______________________________________________________

5. Have you ever been detained, arrested, or charged, with driving while intoxicated (DWI) or driving while under the influence (DUI)? ________ if yes, explain in detail supplying date, location, arresting agency, disposition etc.
   ______________________________________________________
   ______________________________________________________

6. Do you currently have any violations in this state or any other state that are outstanding? ________ If yes, explain in detail supplying reason, dates, agency, disposition
   ______________________________________________________
   ______________________________________________________

7. Have you ever obtained or possessed a falsified or fictitious driver’s license? ________ If yes, explain in detail and include the reason for possession
   ______________________________________________________
   ______________________________________________________

Investigator’s Initials ____________________ Applicant’s Initials ____________________

(18)
8. List all traffic violations/summonses, tickets, parking tickets, and accidents that you have been involved in. Circle either violation or accident. List exact violation and municipality/city and state where violation occurred). (Exclude parking meter tickets.

a. Violation/Accident
   Issuing Agency: ____________________ Date: __________ Location:____________________
   Disposition: Guilty ____ Not Guilty ____ Driving School ____ Probation ____
   If other, explain ________________________________________________________________

b. Violation/Accident
   Issuing Agency: ____________________ Date: __________ Location:____________________
   Disposition: Guilty ____ Not Guilty ____ Driving School ____ Probation ____
   If other, explain ________________________________________________________________

c. Violation/Accident
   Issuing Agency: ____________________ Date: __________ Location:____________________
   Disposition: Guilty ____ Not Guilty ____ Driving School ____ Probation ____
   If other, explain ________________________________________________________________

d. Violation/Accident
   Issuing Agency: ____________________ Date: __________ Location:____________________
   Disposition: Guilty ____ Not Guilty ____ Driving School ____ Probation ____
   If other, explain ________________________________________________________________

e. Violation/Accident
   Issuing Agency: ____________________ Date: __________ Location:____________________
   Disposition: Guilty ____ Not Guilty ____ Driving School ____ Probation ____
   If other, explain ________________________________________________________________

f. Violation/Accident
   Issuing Agency: ____________________ Date: __________ Location:____________________
   Disposition: Guilty ____ Not Guilty ____ Driving School ____ Probation ____
   If other, explain ________________________________________________________________

Investigator’s Signature ___________ Applicant’s Signature __________________________

(19)
AFFIDAVIT AND CERTIFICATION OF APPLICANT

I certify that all of 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. Furthermore, I authorize the Gloucester Township Police Department to verify any and all information contained herein and to review my employment, education, financial, criminal history, military, disciplinary, and any other records and information from any source as noted in the duly executed authorization and release form.

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

Date: __________________ Signature ________________________________

State of __________________
County of __________________

Sworn to and subscribed before me this ____________________________, 20____

__________________________
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
CHARACTER REFERENCES

Provide the names and addresses of four (4) personal friends who are not listed elsewhere in this application:

1. Name: ____________________________
   Address: ____________________________
   Home Phone Number: ____________________________
   Cellular Phone Number: ____________________________
   Occupation: ____________________________
   Years Known: ____________________________

2. Name: ____________________________
   Address: ____________________________
   Home Phone Number: ____________________________
   Cellular Phone Number: ____________________________
   Occupation: ____________________________
   Years Known: ____________________________

3. Name: ____________________________
   Address: ____________________________
   Home Phone Number: ____________________________
   Cellular Phone Number: ____________________________
   Occupation: ____________________________
   Years Known: ____________________________

4. Name: ____________________________
   Address: ____________________________
   Home Phone Number: ____________________________
   Cellular Phone Number: ____________________________
   Occupation: ____________________________
   Years Known: ____________________________

Investigator’s Initials ____________________________ Applicant’s Initials ____________________________

(21)