

**BERNARDSVILLE POLICE DEPARTMENT
INITIAL APPLICATION FOR EMPLOYMENT**

Please print responses and add additional pages as required:

Date of Application: _____

Position Applied For:

<input type="checkbox"/> Police Officer	<input type="checkbox"/> Special Law Enforcement Officer
<input type="checkbox"/> Police Dispatcher FT or PT	<input type="checkbox"/> Records Clerk FT or PT
<input type="checkbox"/> Police Matron PT	<input type="checkbox"/> Police Language Interpreter PT
<input type="checkbox"/> School Crossing Guard	<input type="checkbox"/> Other _____

GENERAL INFORMATION:

Last Name: _____ First Name: _____ MI: _____

Street Address: _____

Mailing Address: _____

Home Phone # _____ Alternate Phone #: _____

Email Address: _____

Social Security Number (optional) _____

How did you learn of this position?

Have you ever been or are you currently employed by the Borough of Bernardsville?
If yes, in what capacity?
 Yes No

Are any of your relatives currently employed by the Borough of Bernardsville? If so
please provide the name of the employee and position held.
 Yes No

Are you prevented from lawfully becoming employed in this country because of Visa
or Immigration Status?
 Yes No

Are you available to work shiftwork including days, nights, weekends and holidays?
 Yes No

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What is your desired salary range? _____

EDUCATION:

Check Highest Level of Education: Elementary ___ High School ___ College ___

List All Schools Attended:

Name/Address of School	Years Completed	Degree Obtained

WORK EXPERIENCE:

List employment history starting with your current employment.

Employer/Address/Phone #	Dates Employed	Position Held	Reason Left

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Date Recd.	Description/Details

MILITARY SERVICE/TRAINING:

U.S. Armed Forces: Yes ___ No ___ **Dates Served:** _____

Current serving in Military Reserve or National Guard Service: Yes ___ No ___

Army ___ **Navy** ___ **Air Force** ___ **Marines** ___ **Coast Guard** ___

List any other specialized military training, skills or certifications received.

Date Recd.	Description/Details

OTHER TRAINING AND CERTIFICATIONS:

Describe other: (List any other professional certifications)

Date Recd.	Description/Details

REFERENCES:

List three references that we can contact regarding this application.

Name	Address	Phone #	Relationshi

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CERTIFICATION:

I certify that the responses provided herein are true and accurate. I further authorize employees of the Borough of Bernardsville to investigate all responses and statements made in this application of employment.

Signature of Applicant _____ Date _____

Resume Attached: Yes ____ No ____

Application received: (Date) _____ Received by: _____

NOTICE:

Applicants selected for offers of employment may be subject to a thorough background investigation including a criminal history check, mental health check, medical and or psychological examinations depending upon the position applied for.

Return application and resume to:

**Chief of Police
Bernardsville Police Department
166 Mine Brook Road
Bernardsville, NJ, 07924**

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