RARITAN BOROUGH POLICE DEPARTMENT

20 First Street • Raritan, New Jersey 08869

KENNETH J. McCORMICK III
CHIEF OF POLICE

TEL: 908-725-6700
FAX: 908-707-1027

APPLICATION INSTRUCTIONS

1. ALL applications must be neatly handwritten or typed and completed in full.

2. ALL applications must be submitted by the posted return date and time. Applications received after the return date and time will not be considered. No exceptions.

3. ALL applications must be accompanied by a non-refundable $30.00 fee, checks made out to the Borough of Raritan.

4. Applicant vouchers are to be supplied to the person of your choice and mailed back per the instructions on the voucher form.

5. A Resume must be supplied with your application.

6. A copy of your PTC Basic Course for Police Officers certification or Class II Special Police Officer certification must be supplied with your application.

7. Incomplete applications or those missing information will not be considered and you will be removed from the hiring process.

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APPLICATION for EMPLOYMENT

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RARITAN BOROUGH POLICE DEPARTMENT

RELEASE AUTHORIZATION

To Whom It May Concern:

I, _____ am making application for employment to the Raritan Borough Police Department. As a result, an investigation is being conducted to determine my eligibility.

Therefore, I hereby authorize a review and full disclosure of all records, including my credit report, Internal Revenue Service records, medical records or any part thereof, concerning myself to any duly authorized agent of the Raritan Borough Police Department, whether the said records are public or private and including those which may be deemed to be of a privileged or confidential nature. The intention of this authorization is to provide information that will be utilized for investigative resource material.

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

A photo static copy of this authorization will be considered as effective and valid as the original.

DATE: _____ SIGNATURE : _____

DATE OF BIRTH: _____ S.S#: _____

RARITAN BOROUGH POLICE DEPARTMENT

FORMAL APPLICATION FOR EMPLOYMENT

PRINT: LAST NAME FIRST MIDDLE SUFFIX

MAILING ADDRESS: NUMBER STREET OR R.D. NUMBER CITY

COUNTY STATE ZIP CODE

HOME PHONE NUMBER CELL PHONE NUMBER

INSTRUCTIONS: READ CAREFULLY PRIOR TO FILLING OUT APPLICATION

These instructions are provided as a guide to assist you in properly completing your formal Application for employment. It is essential that the information be accurate in all respects. It will be used as a basis for the Background Investigation that will determine your eligibility for employment.

1. Your formal Application for employment should be printed legibly in ink or typed. Answer all questions to the best of your ability.

2. If a question is not applicable to you, enter N/A in the space provided. Leave no blank spaces.

3. Avoid errors by reading the direction carefully before making any entries on the form. Be sure your information is correct and in proper sequence before you begin. All time periods in your background must be accounted for.

4. You are responsible for obtaining correct addresses. If you are not sure of an address, check it by personal verification. Your local library may have a directory service or copies of local phone directories.

5. An accurate and complete form will help expedite your investigation. On the other hand, deliberate omissions or falsifications may result in disqualification. Failure to return this application for employment properly completed by the given due by date, will result in removal of your name from further participation at this time.

6. Once your application is complete, the application along with all required documents are to be returned to police headquarters in a sealed envelope and addressed to the Chief of Police.

RARITAN BOROUGH POLICE DEPARTMENT

WARNING: Any misstatement of fact, omissions or attempt to mislead this agency, its investigators or the appointing authority, deliberate or in error, may lead to your disqualification.

1. FULL NAME:

   Last Name: _____ Date of Birth: _____

   First Name: _____ Middle Name: _____

   Maiden Name: _____ Social Security No.: _____

   Current occupation: _____

2. Give any other names you have used or been known by, and attach a statement giving reasons:

   _____

3. Current Address: _____
   Street City State Zip

4. Place of Birth: _____
   City or town County State

5. Age: _____ Sex: _____ Height:_____ Weight: _____ Eye Color: _____ Hair color: _____

6. Scars & Tattoos: _____

7. Do you wear contact lenses or glasses? _____ What kind: _____

CITIZENSHIP

8. Are you a native born or naturalized citizen? Native born: _____ Naturalized: _____

If you are of foreign birth, or are a naturalized citizen, fill in the following:

Country of Birth: _____

Port or place of departure to the United States: _____ Date: _____

Point of entry into the United States: _____ Date: _____

How were you transported to the United Stated? (Ship, Plane, etc.) _____

Name of transport conveyance and or company you arrived on: _____

If a naturalized citizen, name and address of person who sponsored you on arrival: _____

_____

How did you obtain citizenship? (Give details) _____

_____

_____

Petition number: _____ Date: _____

Court: _____ State: _____ Certificate number: _____

9. List in order, beginning with the most recent, all prior places of residence within the past 20 years:

From: _____ To: _____

Street Address: _____ Apt. Number: _____

City: _____ County: _____ State: _____ Zip Code: _____

With whom did you reside there? _____

From: _____ To: _____

Street Address: _____ Apt. Number: _____

City: _____ County: _____ State: _____ Zip Code: _____

With whom did you reside there? _____

From: _____ To: _____

Street Address: _____ Apt. Number: _____

City: _____ County: _____ State: _____ Zip Code: _____

With whom did you reside there? _____

From: _____ To: _____

Street Address: _____ Apt. Number: _____

City: _____ County: _____ State: _____ Zip Code: _____

With whom did you reside there? _____

From: _____ To: _____

Street Address: _____ Apt. Number: _____

City: _____ County: _____ State: _____ Zip Code: _____

With whom did you reside there? _____

If you lived at additional locations, insert information on those residences on a new sheet and attach it to the end of this application.

10. If you reside with or have resided with someone other than a spouse or parents list each below providing the required information and indicate at which residence this occurred:

Name: _____ Relationship: _____

Phone: ( ) _____

Current address: _____

Name: _____ Relationship: _____

Phone: ( ) _____

Current address: _____

Name: _____ Relationship: _____

Phone: ( ) _____

Current address: _____

Name: _____ Relationship: _____

Phone: ( ) _____

Current address: _____

11. List all places where you are registered to vote: (If none, so state.)

City	County	State	Year

SOCIAL STATUS

12. Are you single? ____, Marrired? ____ Date: _____ Separated? _____ Date:_____

    Divorced? _____ Date: _____, widowed or widower? _____ Date: _____

13. Provide the following information regarding marriage or marriages:

    Number of times married: _____ Where? _____

    _____

14. Were you ever divorced or had a marriage annulled? _____ How many times? _____

    Where? _____

15. Were you ever legally or voluntarily separated? _____ How many times? _____

    When? _____

16. If separated, annulled or divorced, provide present address of the spouse(s) from whom you were separated, annulled or divorced:

    Name: _____ Phone: ( ) _____

    Address: _____

    Name: _____ Phone: ( ) _____

    Address: _____

    Name: _____ Phone: ( ) _____

    Address: _____

17. If separated, annulled or divorced, indicate which below and provide the date of each action, the Court and State in which the action occurred, the presiding Judge, the party initiating the action and the action awarded by the Court

    _____

    _____

    _____

    _____

    _____

    _____

18. Spouse:

Name: _____

Maiden Name: _____ Occupation: _____

Place of employment: _____

Address if different than applicant: _____

19. Were you ever the parent of a child either by natural birth or by legal adoption? _____

20. List below every child either born to you or legally adopted and include step – children:

Name	Sex	Place of Birth

Where and with whom does this / these child(ren) reside? _____

_____

_____

21. Have you ever been involved as a plaintiff _____ or a defendant _____ in a paternity proceeding? _____

If yes, state in full detail the date, location, party involved and the outcome of the action: _____

_____

_____

_____

_____

_____

_____

_____

22. **Family information** – Father, Mother, Brothers, Sisters: If deceased indicate same:

Father: _____ Living? _____ Occupation: _____

Address: _____

Phone: ( ) _____

Mother: _____ Living? _____ Occupation: _____

Address: _____

Phone: ( ) _____ Maiden name: _____

Brother / Sister: _____ Living? _____ Occupation: _____

Address: _____

Phone: ( ) _____ Married? _____

Brother / Sister: _____ Living? _____ Occupation: _____

Address: _____

Phone: ( ) _____ Married? _____

Brother / Sister: _____ Living? _____ Occupation: _____

Address: _____

Phone: ( ) _____ Married? _____

Brother / Sister: _____ Living? _____ Occupation: _____

Address: _____

Phone: ( ) _____ Married? _____

Brother / Sister: _____ Living? _____ Occupation: _____

Address: _____

Phone: ( ) _____ Married? _____

Brother / Sister: _____ Living? _____ Occupation: _____

Address: _____

Phone: ( ) _____ Married? _____

Brother / Sister: _____ Living? _____ Occupation: _____

Address: _____

Phone: ( ) _____ Married? _____

23. List names of three close friends and / or associates other than references:

Name: _____ Phone ( ) _____

Address: _____

Occupation: _____ Duration of association: _____

Name: _____ Phone ( ) _____

Address: _____

Occupation: _____ Duration of association: _____

Name: _____ Phone ( ) _____

Address: _____

Occupation: _____ Duration of association: _____

24. Provide three references with whom you personally are socially or professionally acquainted:

Name: _____ Age: _____ Phone ( ) _____

Address: _____

Occupation: _____ Duration of association: _____

Name: _____ Age: _____ Phone ( ) _____

Address: _____

Occupation: _____ Duration of association: _____

Name: _____ Age: _____ Phone ( ) _____

Address: _____

Occupation: _____ Duration of association: _____

EDUCATION

25. List chronologically (earliest date first, beginning at the first grade) all schools, colleges and training courses you have attended. (*If additional room is needed, attach on a new sheet at the end of this application*)

School: _____ From: _____ To: _____

Exact Address: _____

Grade levels attended: _____

School: _____ From: _____ To: _____

Exact Address: _____

Grade levels attended: _____

School: _____ From: _____ To: _____

Exact Address: _____

Grade levels attended: _____

School: _____ From: _____ To: _____

Exact Address: _____

Grade levels attended: _____

School: _____ From: _____ To: _____

Exact Address: _____

Grade levels attended: _____

School: _____ From: _____ To: _____

Exact Address: _____

Grade levels attended: _____

COLLEGE or TRADE SCHOOLS

26. College / School: _____ From: _____ To: _____

Exact Address: _____

Full Time: _____ Part Time: _____ Degree or Certification sought: _____

Degree or Certification Received? _____ If not, why not: _____

College / School: _____ From: _____ To: _____

Exact Address: _____

Full Time: _____ Part Time: _____ Degree or Certification sought: _____

Degree or Certification Received? _____ If not, why not: _____

College / School: _____ From: _____ To: _____

Exact Address: _____

Full Time: _____ Part Time: _____ Degree or Certification sought: _____

Degree or Certification Received? _____ If not, why not: _____

College / School: _____ From: _____ To: _____

Exact Address: _____

Full Time: _____ Part Time: _____ Degree or Certification sought: _____

Degree or Certification Received? _____ If not, why not: _____

If degree not received, how many credits have you completed? _____

Transcripts of student records must be provided when requested as part of this application process.

27. What professional license(s) do you possess? _____

_____

_____

28. Other than English what languages(s) do you speak fluently? _____

29. List any problems you had while attending school (absenteeism, tardiness, poor grades, other discipline problems) including college or trade schools.

School	Date or Year	Problems

30. Have you ever served on active duty in any military organization of the United States? _____

If yes, what organization? _____ From: _____ To: _____

Highest rank held: _____ Type of Discharge received: _____

What was your military specialty? _____

31. Have you ever served in a Reserve military organization or National Guard Unit? _____

If yes, what organization? _____ From: _____ To: _____

Highest rank held: _____ Type of Discharge received: _____

What was your military specialty? _____

32. Have you ever served in a Military organization of a foreign government? _____

If yes, what organization? _____ From: _____ To: _____

Highest rank held: _____ Type of Discharge received: _____

What was your military specialty? _____

Under what circumstances did this foreign service occur? Give Details: _____

_____

_____

_____

33. Did you receive any medals or decorations as a member of the military service? _____

If yes, what were they? _____

_____

34. Were you ever court martialed, tried on charges, or were you the subject of a summary court, deck court, captain's mast, company punishment, or any other disciplinary action? _____

If yes, how many times? _____ If yes, give details of charges, agency concerned, dates and dispositions: _____

_____

_____

_____

EMPLOYMENT HISTORY

35. Present Employer: _____

Address: _____ City: _____ State: _____

Zip Code: _____ Phone: _____ Immediate supervisor: _____

Date hired: _____ Duties: _____

36. Are you now engaged in any business as an owner (active or silent), partner, stockholder or corporate member? _____

If yes, give details: _____

_____

37. Has your name ever been submitted or used as a trustee, officer, or in any capacity, of any labor trade union, organization or affiliate? _____ If yes, give details: _____

_____

_____

38. List below, chronologically, earliest dates first, each and every place you were previously employed since the age of 16. **OMIT NONE.** Give correct, full addresses. Give dates of idleness between periods of employment in proper sequence. Include all part time employment. *(Attach a separate piece of paper if needed at the end of this application)*

From: _____ To: _____ Employer: _____

Address: _____

Immediate supervisor: _____ Reason for leaving: _____

From: _____ To: _____ Employer: _____

Address: _____

Immediate supervisor: _____ Reason for leaving: _____

From: _____ To: _____ Employer: _____

Address: _____

Immediate supervisor: _____ Reason for leaving: _____

From: _____ To: _____ Employer: _____

Address: _____

Immediate supervisor: _____ Reason for leaving: _____

From: _____ To: _____ Employer: _____

Address: _____

Immediate supervisor: _____ Reason for leaving: _____

From: _____ To: _____ Employer: _____

Address: _____

Immediate supervisor: _____ Reason for leaving: _____

From: _____ To: _____ Employer: _____

Address: _____

Immediate supervisor: _____ Reason for leaving: _____

From: _____ To: _____ Employer: _____

Address: _____

Immediate supervisor: _____ Reason for leaving: _____

39. Were you ever discharged or asked to resign from employment? _____ If yes, how many times? _____

Give details of discharge or forced resignation below:

Employer	**Date**	**Supervisor's reason**

40. Were you ever subjected to disciplinary action in connection with any employment? _____

If yes, give details:

Employer	**Date**	**Supervisor's reason**

41. Have you or your spouse, been in any corporation or partnership of which you and he/she were an officer, director, or partner, ever possessed a license or permit (excluding driver's license and learner's permit) issued by any governmental agency? _____ If yes give details: _____

_____

_____

42. Have you or your spouse, ever possessed a professional or occupational license, permit or certification? _____

If yes, give details: _____

_____

43. Has any license or permit, including driver's license or learner's permit, issued by any city, state or federal agency ever been denied to you, your spouse, or to any corporation or partnership of which you or your spouse was an officer, director or partner? _____ Has any such license or permit ever been revoked, cancelled or suspended? _____

If yes, give details: _____

_____

_____

44. Have you ever sponsored, vouched for, served as a character witness for, or made any recommendations for or concerning any person or premises to any municipal, state or federal agency in connection with the issuance, revocation, or suspension of any license or permit or for any other reason? _____ If yes, give reason: _____

_____

_____

45. Have you ever received unemployment insurance or other federal, state or local benefits or assistance? _____

If yes, give details as to when, from whom, what kind and for how long. _____

_____

_____

46. Have you ever received any public assistance to which you were not entitled? _____ If yes, explain:_____

_____

_____

47. Have you previously made application for employment with this or any other law enforcement agency? _____

If yes, give full details as to the agency (ies), when and the status of the application (s):

_____

_____

_____

_____

_____

48. Have you ever been rejected by another police department for employment? _____ If yes, give full details

As to when, where and why: _____

_____

_____

_____

49. Are you currently on an employment list, or have you taken any tests for potential employment or completed any formal applications for employment, with any other law enforcement agency? _____ If yes, what agency?

and when? _____

_____

_____

50. Were you ever or are you a member of a labor, or fraternal organization? _____ If yes, list below every organization:

From: _____ To: _____ Organization: _____

Address: _____ Type: _____

From: _____ To: _____ Organization: _____

Address: _____ Type: _____

From: _____ To: _____ Organization: _____

Address: _____ Type: _____

From: _____ To: _____ Organization: _____

Address: _____ Type: _____

GENERAL

51. Do you smoke cigarettes, cigars or a pipe? _____ If yes, how frequently? _____

52. Do you consume any alcoholic beverages? _____ If yes, how frequently? _____

Quantity: _____ How would you describe your use of alcoholic beverages: _____

_____

_____

FINANCIAL

You must include a TRW or similar type of financial report with this completed application in addition to providing the following financial information.

53. Have you ever filed for bankruptcy, had a debt garnishment or wage assessment or judgment held against you or currently pending against you? _____ If yes, give details: _____

_____

_____

Have you ever defaulted on a loan or had property of any kind repossessed? _____ If yes, give details: _____

_____

_____

_____

54. Current outstanding debt: List all loans, credit cards and any other debt held by you:

Type: _____ With whom: _____

Address: _____

Date incurred: _____ Original amount: _____ Present amount: _____

Monthly payment: _____ Amount past due: _____

Type: _____ With whom: _____

Address: _____

Date incurred: _____ Original amount: _____ Present amount: _____

Monthly payment: _____ Amount past due: _____

Type: _____ With whom: _____

Address: _____

Date incurred: _____ Original amount: _____ Present amount: _____

Monthly payment: _____ Amount past due: _____

Type: _____ With whom: _____

Address: _____

Date incurred: _____ Original amount: _____ Present amount: _____

Monthly payment: _____ Amount past due: _____

Type: _____ With whom: _____

Address: _____

Date incurred: _____ Original amount: _____ Present amount: _____

Monthly payment: _____ Amount past due: _____

Type: _____ With whom: _____

Address: _____

Date incurred: _____ Original amount: _____ Present amount: _____

Monthly payment: _____ Amount past due: _____

55. Did you ever default on such loan or are you now or in the past in arrears more than three months on the scheduled repayments? _____ If yes, give details: _____

_____

_____

56. Are you a co-maker on an outstanding loan? _____ If yes, give details: _____

_____

_____

57. Have you ever been bonded? _____ If yes, give complete details with respect to each bond as to the reason it was required, by whom it was required, from whom was it obtained and the amount and date it was obtained: _____

_____

_____

58. Have you ever been refused a bond? _____ If yes, by whom and reason: _____

_____

_____

59. Were you or your spouse ever summoned or subpoenaed to court in a civil action or proceeding in this state or elsewhere or could such a possibility ensue as a result of a recent occurrence or transaction? _____ If yes, indicate below every civil action or proceeding in which you or your spouse were a party to or likely to become party thereto. Give dates type of action or proceeding, whether plaintiff, defendant, petitioner or witness, court and disposition: _____

_____

_____

_____

INCOME & FINANCIAL HISTORY

60. What is your present salary or wage? _____

What is your spouse's salary or wage? _____

What is your average yearly income over the past three years? _____

61. Do you have any income from any source other than your principal occupation? _____ If yes,

how much? _____ The source? _____ How often? _____

ARRESTS, SUMMONSES, ETC.

(You MUST disclose any and all even if subsequently expunged)

62. Have you ever been arrested for or charged with Juvenile Delinquency? _____ If yes, complete the following:

Date: _____ Age: _____ Violation charged: _____

Location: _____ Police agency: _____

Court disposition: _____

Sentence: _____

Date: _____ Age: _____ Violation charged: _____

Location: _____ Police agency: _____

Court disposition: _____

Sentence: _____

Date: _____ Age: _____ Violation charged: _____

Location: _____ Police agency: _____

Court disposition: _____

Sentence: _____

Date: _____ Age: _____ Violation charged: _____

Location: _____ Police agency: _____

Court disposition: _____

Sentence: _____

Date: _____ Age: _____ Violation charged: _____

Location: _____ Police agency: _____

Court disposition: _____

Sentence: _____

63. Have you ever been summoned, subpoenaed, requested or otherwise required to testify before any municipal, state or federal agency, committee or other investigative body? _____ If yes, give complete details: _____

_____

_____

64. Have you ever received a summons for any violation of the Fish and Game laws? _____ If yes, complete the following:

Date: _____ Violation: _____ Age: _____

Location: _____ Court disposition: _____

Penalty: _____ Police agency involved: _____

Date: _____ Violation: _____ Age: _____

Location: _____ Court disposition: _____

Penalty: _____ Police agency involved: _____

Date: _____ Violation: _____ Age: _____

Location: _____ Court disposition: _____

Penalty: _____ Police agency involved: _____

65. Have you ever been arrested for, or charged with, a violation of the disorderly persons act or city ordinance? _____

If yes, insert the information required below:

Date: _____ Violation: _____ Age: _____

Location: _____ Court disposition: _____

Penalty: _____ Police agency involved: _____

Date: _____ Violation: _____ Age: _____

Location: _____ Court disposition: _____

Penalty: _____ Police agency involved: _____

Date: _____ Violation: _____ Age: _____

Location: _____ Court disposition: _____

Penalty: _____ Police agency involved: _____

Date: _____ Violation: _____ Age: _____

Location: _____ Court disposition: _____

Penalty: _____ Police agency involved: _____

Date: _____ Violation: _____ Age: _____

Location: _____ Court disposition: _____

Penalty: _____ Police agency involved: _____

66. Have you ever been arrested, indicted, or convicted for any violation of the criminal laws? _____

If yes, complete the information required below:

Date: _____ Violation: _____ Age: _____

Location: _____ Court disposition: _____

Penalty: _____ Police agency involved: _____

Date: _____ Violation: _____ Age: _____

Location: _____ Court disposition: _____

Penalty: _____ Police agency involved: _____

Date: _____ Violation: _____ Age: _____

Location: _____ Court disposition: _____

Penalty: _____ Police agency involved: _____

Date: _____ Violation: _____ Age: _____

Location: _____ Court disposition: _____

Penalty: _____ Police agency involved: _____

67. Have you ever had a criminal or arrest record expunged? _____ If yes, give complete details: _____

_____

_____

_____

68. Have you ever been held as a material witness? _____ If yes, insert the information below:

Date: _____ Violation: _____ Age: _____

Location: _____ Court disposition: _____

Penalty: _____ Police agency involved: _____

Date: _____ Violation: _____ Age: _____

Location: _____ Court disposition: _____

Penalty: _____ Police agency involved: _____

Date: _____ Violation: _____ Age: _____

Location: _____ Court disposition: _____

Penalty: _____ Police agency involved: _____

69. Have you ever been held as a suspicious person or investigated by any law enforcement or private security agency for any reason? _____ If yes, give details below: _____

_____

_____

_____

70. Have you ever been fingerprinted for any reason prior to submitting your application for employment with this agency? ____

If yes, complete the following:

Date	Where	Purpose

SUBVERSIVE AFFILIATIONS

71. Are you now, or have you ever been, a member of any organization, association, movement or group, which advocates the overthrow of our constitutional form of government, or which seeks to alter the form of the government of the United States by unconstitutional or unlawful means; or who's purpose and intent is to unlawfully deny or circumvent the civil rights of any person in the United States or this State? _____

72. Are you now, or have you ever been, affiliated or associated with any of the organizations or groups described in question 71 above? _____

73. 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 groups described in question number 71? _____

PRE-EMPLOYMENT BACKGROUND INVESTIGATION INFORMATION

74. Have you ever signed or solicited other to sign any petition sponsored or issued by any organization or group described in question number 71 above, or any petition which has as its purpose the aiding of any person, cause or program connected in any way with organizations or groups described in question number 71 above? _____

75. 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 number 71 above? _____

    b. Payment or collection of any monry, dues, contributions or donations to any organization or group described in Question number 71 above? _____

c. Sale or distribution of any written or printed matter prepared, reproduced, or published by a group or organization described in question number 71 above? _____

d. Purchased or subscribed to any publication or periodical, reproduced, or published by any group or organization described in question number 71 or any of its agents? _____

76. If you answered yes to any of the above questions, explain: _____

_____

_____

_____

_____

MOTOR VEHICLE HISTORY

77. Have you ever received a summons for a violation of the Motor Vehicle Laws in this or any other State? _____

If yes, insert the required information below:

Date	Offense	Location	Court Disposition	Police Agency

78. Was your Motor Vehicle Registration certificate, Driver's or other vehicle operator's license ever revoked? _____

Ever Suspended? _____ If yes, which license? _____

When? _____ Why? _____

_____

Was your Registration Certificate or Driver's License ever restored? _____ When? _____

Where? _____

79. Have you ever been involved in a motor vehicle accident either as a registered owner, operator, passenger or pedestrian, Which resulted in property damage or personal injury to you or someone else? _____ If yes, Give full details: _____

_____

_____

_____

80. Do you currently or have you ever possessed any of the following? If yes, provide the following information:

Motor Vehicle Operator's License: _____ State: _____ Class: _____

License Number: _____ Expiration: _____

Conditions placed on license: _____

Name issued to, if different from applicant's current name: _____

Commercial Vehicle Operator's License: _____ Class: _____

State: _____ License Number: _____

Date issued: _____ Expiration: _____ Endorsements: _____

Restrictions: _____

FAA Pilot's License: _____ Type: _____ Date Issued: _____

License Number: _____ Is license current? _____

Conditions or restrictions on the license: _____

_____

81. Do you currently or have you within the past five years owned a motor vehicle, motorcycle, moped, power boat or aircraft of any kind? _____ If yes, provide the following information on all:

Type	Year	Make and Model	Registration #	State	Presently Owned?

82. List the names and addresses of the companies which carry your auto or other type of craft insurance:

_____

_____

_____

_____

83. Has you auto or other type of craft insurance ever been revoked or refused? _____ If yes, give details: _____

_____

_____

84. List below all professional, civic and social organizations of which you have been a member of within the last five years.

_____

_____

_____

_____

85. What volunteer or community activities have you engaged in within the last five years? Provide the name and address of the Sponsoring organization or group and a description of the activities performed: _____

_____

_____

_____

86. Do you possess expertise or competence in a particular trade, skill or technology? _____ If yes, describe your level of experience and competence. _____

_____

_____

_____

87. What hobbies and / or sports do you engage in? _____

_____

_____

_____

88. You have been provided with a list of essential functions for the position of police officer in this municipality. You are to read those and if you have any questions concerning any of them you are to contact the Office of the Chief of Police. Having read those essential functions, and having all of your questions answered, do you believe that you can perform satisfactorily all those essential functions once you receive or since you have received basic training at a Police Training Commission approved police academy? _____

NOTE: If there is other information which may be relevant, directly or indirectly, that this agency should have knowledge of in order to conduct a thorough background investigation of you, as a candidate for employment in this agency, or insufficient space was provided above for complete answers, you are required to add this additional information on a separate sheet(s) of paper. Indicate the question number the added information applies to. Attach any additional pages at the back of this form. Indicate below the number of additional pages attached. **You are reminded that any false or deliberate misstatement of facts will result in your disqualification for employment by this agency.**

Number of additional pages attached, if any? _____

APPLICANT:

The voucher attached hereto is to be given to three (3) persons you wish to vouch for you as an applicant for the position of Police Officer in the Borough of Raritan. You are responsible to make copies of the included voucher section, three (3) pages, and have your vouchers complete them and mail the voucher back accordingly.

APPLICANT REFERENCE REQUEST

REFERENCE FOR: _____, who is seeking employment
NAME

with the Borough of Raritan as a Police Officer.

I, the above named applicant requests that _____ serve as a personal
Reference name

reference for me and to provide this completed reference form to the above named agency. I herein request and authorize you to provide any information required in completing the following form. You are required to respond truthfully in completing the following form and in providing information upon which the employing agency will evaluate my suitability for the position I seek. I herein authorize you to provide the required information even if that information might unfavorably impact upon my application with the above named law enforcement agency.

_____ _____
Signature of Applicant Date

TO THE VOUCHER:

As a voucher, you are required to respond fully and truthfully in the answers you provide below and in any other information you provide in regarding the above applicant who seeks employment with the Raritan Borough Police Department.

The voucher should read carefully and respond truthfully to all questions and in all statements provided before signing the reference form. All information must be provided by the voucher and within the personal knowledge of the voucher.

I, the undersigned person declare that I am over eighteen (18) years of age, that I have personally known the applicant for at least three (3) years, that I have read the foregoing and all the statements and information provided herein by me is true to the best of my knowledge, and I am not related in any way to the applicant. I will, upon request, give further facts concerning the applicant as I may possess. I understand that my responses will be considered to be confidential and not provided to the applicant.

(PLEASE TYPE OR PRINT BY HAND CLEARLY ALL RESPONSES REQUIRED BELOW)

VOUCHER:

Name: _____ Date of Birth: _____

Address: _____ City: _____

State: _____ Home phone: _____ Cell phone: _____

Occupation: _____

How long have you personally known the applicant? _____

In your opinion would the applicant make a good law enforcement officer? _____

If you were in danger, would you want the applicant to be to officer assigned to assist you? _____

Why, _____

_____

_____

_____

_____

In your opinion, do most persons who know the applicant as well as you agree with your assessment of the applicant? _____

Why? _____

_____

_____

What do you believe the applicant's most significant attributes are? _____

_____

_____

_____

In your opinion, what deficiencies should the applicant work to improve upon and how would that improvement help the applicant to be a successful law enforcement officer? _____

_____

_____

_____

_____

Do you personally know of any reason why the applicant should not be hired as a law enforcement officer for this agency? _____

If the answer is yes, please give reason: _____

_____

On a scale from one to ten, where would you place the applicant as an individual who possesses all of the character, qualities, personality and mental ability necessary to be a good and successful law enforcement officer in this agency? _____

On a scale from one to ten, where do you place your level of comfort and willingness to serve as a reference for this applicant, knowing that this agency will give significant weight to your responses in determining whether or not to employ this applicant as a law enforcement officer? _____

Signature: _____ Date: _____

PLEASE MAIL THIS FORM DIRECTLY TO:

Chief Kenneth McCormick

Raritan Borough Police Department

20 First Street

Raritan, New Jersey 08869

IF VOUCHER HAS ANY QUESTIONS – CONTACT AGENCY DIRECTLY:

Agency Contact Person: Chief Kenneth J. McCormick Phone: (908) 725-6700 X 11

RARITAN BOROUGH POLICE DEPARTMENT

POLICE OFFICER - ESSENTIAL FUNCTION QUALIFICATIONS

To adequately perform the responsibility of a police officer, the candidate must be able
To perform the essential functions of the position.

1. Walk, sometimes for long periods of time, in extreme weather conditions, in physically hazardous locations.
2. Run, sometimes sprinting at a high rate of speed for a short distance, in extreme weather conditions, in physically hazardous locations.
3. Ascent or descent stairs.
4. Climb over, pull up over, and jump over obstacles.
5. Jump down from elevated surfaces or areas.
6. Climb or crawl through openings.
7. Crawl under obstructions or in confined areas.
8. Balance on uneven or narrow surfaces.
9. Use body force to gain entrance or break through barriers.
10. Push objects, vehicles, or persons.
11. Pull objects or persons.
12. Lift and carry objects or persons.
13. Drag objects or persons.
14. Sit or stand for extended periods of time.
15. Employ defensive tactics, using balance, leverage, concentration of power, and opponent's power.
16. Swim.
17. Operate a motor vehicle, during the day or at night, in emergency situations, at high rates of speed, on the open road or in congested traffic, in unsafe conditions caused by factors such as fog, smoke, rain, ice, or snow.
18. Detain individuals.
19. Stop suspicious individuals and vehicles.
20. Pursue fleeing suspects, in a vehicle or on foot.
21. Disarm persons.
22. Restrain or subdue resisting suspects.
23. Effectuate a full physical custody arrest, forcibly if necessary, using handcuffs and other restraints.
24. Conduct visual and audio surveillance.

25. Perform law enforcement patrol functions, on foot or in a vehicle.

26. Issue Summonses.

27. Direct traffic, sometimes for long periods of time, using hand signals, flares, barricades, etc.

28. Observe, record, recall and report incidents and information.

29. Operate radar equipment.

30. Administer field sobriety tests.

31. Operate a fire extinguisher.

32. Fingerprint, photograph and videotape individuals, objects and scenes.

33. Transport citizens, prisoners and committed mental patients, using handcuffs and other restraints, when appropriate.

34. Work rotating shifts and adapt to irregular working conditions.

35. Maintain mental alertness and readiness to act, even during periods of calm and inactivity.

36. Identify, collect, label and preserve evidence.

37. Secure the scene of a crime, emergency or disaster.

38. Stand guard at the scene of a crime, emergency or disaster to prevent damage, loss or injury.

39. Control crowds.

40. Secure and evacuate persons from particular areas, using either verbal commands or the appropriate degree of physical force.

41. Perform rescue and support functions at the scenes of accidents, emergencies and disasters.

42. Administer emergency first aid.

43. Physically check buildings, including doors and windows, to insure that they are secure.

44. Remedy hazardous conditions by direct action or through notification of the appropriate authority or agency.

45. Perform searches of people, vehicles, buildings and large outdoor areas, which may involve seeing, feeling and detecting objects, and walking for long periods of time.

46. Search for missing, wanted or lost persons and evidence.

47. Load, unload, aim and fire a handgun and shotgun in day and night conditions from a variety of body positions at the proficiency level required by qualification standards.

48. Process arrested persons, which includes examining documents, communicating verbally, and eliciting and recording information.

49. Understand and follow orders, policies and procedures.

50. Accept direction and function cooperatively as one member of a unit.

51. Communicate effectively verbally and in writing, detailing incidents and activities of those involved.

52. Prepare written investigative and other reports, including sketches, using appropriate grammar, symbols and mathematical computations.

53. Read and comprehend legal and non-legal documents, including the preparation and processing of documents such as summonses, affidavits and warrants.

54. Communicate effectively and coherently over telephone, walkie-talkie or radio, initiating or responding to verbal communications.

55. Communicate effectively in court and in other formal settings.

56. Communicate effectively with people, including juveniles, by giving information and direction, by eliciting information, and by advising of rights, processes and procedures.

57. Communicate effectively with individuals in an agitated or distraught condition.

58. Integrate individual activities and goals with the efforts of other members of the law enforcement community for the promotion of common goals and objectives.

59. Mediate disputes and confrontations with hostile and potentially violent individuals.

60. Gather information by observation of behavior, visual inspection and oral communication; determine what information is significant; assess a situation based on that information; and exercise independent judgment to make decisions concerning choice of action and equipment.

61. Perform a variety of tasks, involving different and sometimes contrasting skills in rapid succession during a short period of time.

62. Exercise independent judgement in determining when there is reasonable suspicion to detain, when probable cause exists to search and/or arrest, and when force may be used and to what degree.

63. Endure verbal, mental and physical abuse, including threats, taunts and insults to self, family and fellow officers.

64. Withstand exposure to and deal appropriately with stress involved in dealing with hostile views, opinions and behavior in antagonistic settings; with crime victims, accident victims, disaster victims and their families; with incidents of suicide and domestic violence.