Important Notice to Applicants

The Camden County Police Department conducts background investigations on all potential employees to determine their suitability for employment. The information that is requested in this booklet is necessary in order to complete these background investigations. We may not be able to offer you employment if you fail to answer any question completely and honestly. The information that you provide is confidential and will be used for employment purposes only, however, if necessary, your information may be shared with other entities as it relates to your background investigation.

The Camden County Police Department is committed to a policy of equal opportunity for all prospective and current employees and does not discriminate regardless of race, creed, color, religion, sex, age, national origin or disability.

The selection process for a Police Officer Candidate is an extremely competitive endeavor that requires our agency to identify only the most highly qualified applicants for consideration for employment. You must understand that there are an overwhelming number of highly qualified applicants that you will be competing against for a limited number of position vacancies within this department. Our community expects and demands that we employ only those individuals who possess the highest degree of integrity.

The completion and submission of this application booklet is an important step in a thorough and lengthy employment selection process. These steps include a comprehensive background investigation, and an optional oral review board. Following a conditional offer of employment, you will be required to take a full medical and psychological examination.

All questions contained within this booklet must be completed honestly, accurately and thoroughly. The information that you provide will be carefully analyzed and evaluated to determine your suitability for employment. Do not withhold any information, whether you think that it is important or not. This agency will decide the importance of the information that you have provided. The omission of information and or any deception will not be tolerated and will be justification to remove you from consideration.

While completing the application booklet and when listing individuals and or places of employment, be sure that you provide the full name and identity of the individual or business with their title, position, complete home and or business addresses and any other applicable information. We will not attempt to determine correct spellings, street numbers, apartment numbers, telephone numbers, zip codes or area codes. It is your responsibility to provide complete and accurate information.

If during any phase of your employment, application or selection process, you have any contact of an investigative or prosecutorial nature with any law enforcement officer or agency, you are required to immediately notify the Applicant Unit or your background investigator.

If you have any questions about the application or selection process or need clarification regarding the application booklet, please contact the Applicant Office or your background investigator.
The position of Police Officer is one of tremendous responsibility and trust. In order to assist you in the application process it is imperative that complete, proper and accurate information is supplied to the Camden County Police Department. Your application process will be placed in jeopardy if you supply inaccurate or incomplete information. All information contained within this application will be kept confidential and will remain a part of your official record.

All applications must be completed and mailed to the address below. Any alterations to this application or delays in returning this application will void your status.

Attn: Applicant Investigation Unit
Camden County Police Department
6 Collier Drive, Lakeland Complex
Blackwood, N.J. 08012

1. You must answer all questions that pertain to you. Use N/A (Not Applicable) for those questions that do not apply to you.

2. You must completely answer all questions. Failure to answer questions completely will delay the application process and may void your status.

3. In those questions that require you to identify a jurisdiction where a judgment or legal proceeding took place, the city and state cannot be abbreviated.

4. All responses in this application must be completed in your own handwriting. Use blue ink! The use of a pencil is not authorized. Typed print or other means of electronic printing is not authorized.

5. If you require additional room to answer question(s), please do so in the Additional Information Section of this application. If more space is required, please use and attach lined paper for your responses.

6. Each page must be signed and dated by you.
1. LAST NAME
   FIRST NAME
   MIDDLE NAME

2. STREET ADDRESS
   CITY/STATE/COUNTY
   ZIP CODE

3. Date of Birth:  ____/____/____ Telephone Number: ____________________________
   MONTH  DAY  YEAR
   W/ AREA CODE

4. Are you presently a BCPO certified police officer in New Jersey?  ☐ YES  ☐ NO

5. If the answer to Question 4 is Yes, enter dates of employment:
   from  ____/____/_____ to  ____/____/_____.
   MONTH  DAY  YEAR  MONTH  DAY  YEAR

6. Are you a former New Jersey full-time Police Officer?  ☐ YES  ☐ NO

7. If the answer to Question 6 is Yes, enter dates of employment:
   from  ____/____/_____ to  ____/____/_____.
   MONTH  DAY  YEAR  MONTH  DAY  YEAR

8. Are you a laid-off New Jersey full-time Police Officer?  ☐ YES  ☐ NO

9. If the answer to Question 8 is Yes, enter dates of employment:
   from  ____/____/_____ to  ____/____/_____.
   MONTH  DAY  YEAR  MONTH  DAY  YEAR

10. Are you a graduate of NJ Alternate Route Basic Police Officers Program?  ☐ YES  ☐ NO

11. If the answer to Question 10 is Yes, enter date of graduation:  ____/____/_____.
    Which police academy did you graduate from? __________________ MONTH  DAY  YEAR

12. Have you completed the Basic Course for SLEO Class II?  ☐ YES  ☐ NO

13. If the answer to Question 12 is Yes, enter date of graduation:  ____/____/_____.
    Which Police Academy did you graduate from? __________________ MONTH  DAY  YEAR

14. Have you successfully completed police officer training in another state, or trained for
    federal law enforcement service?  ☐ YES  ☐ NO

15. If the answer to Question 14 is Yes, enter date of graduation:  ____/____/_____.
    What is the name of the training course? __________________ MONTH  DAY  YEAR
    State/Agency? _______ (Please attach certificate of completion and documentation describing the
    curriculum).

16. Are you currently serving as a police officer in another State?  ☐ YES  ☐ NO

17. If the answer to Question #16 is Yes, enter dates of employment: from  ____/____/_____ to
    ____/____/_____; Name of Agency/State _________; Title _______ MONTH  DAY  YEAR
    MONTH  DAY  YEAR

Signature of Candidate ___________________________ Date ___________________________
**DOCUMENT CHECKLIST**

The following original documents must be provided as part of the pre-employment investigation for the position of police officer. If you cannot provide the applicable document(s) listed here, a detailed explanation concerning the reason(s) the document(s) is (are) missing must be supplied. A lack of sufficient explanation for the missing document(s) will void this application. Initial the appropriate space indicating that the required document has been supplied. If the document does not apply, indicate by N/A. Missing documents will delay the application process. These documents must be submitted at your first scheduled appointment with the Application Investigations Unit. At that time, the original documents will be examined, copies will be made, and the original documents will be returned to you.

- __ __ Birth Certificate with raised seal
- __ __ N.J. Driver’s License, sealed certified driving abstract
- __ __ Out of State Driver’s License(s)
- __ __ High School Diploma/GED Certificate
- __ __ College Transcripts. (All courses must be included)
- __ __ Military Service Records (DD 214) and Discharge
- __ __ Marriage Certificate with raised seal
- __ __ Court Orders:
  - Certified Divorce Decree
  - Name Change(s)
  - Adoption(s)
  - Civil or criminal court orders or dispositions
  - Bankruptcy order(s)
  - Ex Parte orders
- __ __ Trade or Professional License(s)
- __ __ Police Training Commission Certificate
- __ __ Other Police/Law Enforcement Training Certificates and Transcripts
- __ __ U.S. Citizenship (Naturalization) Papers
- __ __ Professional Certificates, Awards, Commendations, etc. pertinent to employment as a police officer
- __ __ Passport
- __ __ Firearms ID Card and Firearm Permits
- __ __ Social Security Card

Signature of Candidate ___________________________ Date ___________
1. You must supply three (3) personal references.

2. Your references must be persons that know you and can attest to your character, ability, work and/or study habits, and your residency. Blood relations, current and former employees of the Camden County Police Department, or current or former County of Camden elected officials or politicians cannot be used as references for this purpose.

3. This application shall be used to record applicants for employment with the Camden County Police Department and is specifically for applicants who wish to be considered for employment as a sworn police officer.

4. Applicants must contact the Camden County Department of Police Services to schedule having fingerprints taken. The contact phone number for fingerprint scheduling is 856-382-2690.

**NOTICE TO APPLICANT**

Any candidate who makes a false statement, purposeful omission, misrepresentation or concealment of a material fact, or who practices, attempts to practice any deception or fraud in securing eligibility for appointment, or any candidate who provides answers contrary to official records, will be rejected from the application process and will be disqualified for eligibility.

Information obtained in this regard will be forwarded to the New Jersey Civil Service Commission and will remain with the candidate’s file. Discovery of the aforementioned after a candidate has been appointed to the Camden County Police Department will be cause and justification for dismissal from the department.

**APPLICANT SCREENING AND SELECTION PROCESS**

There is a progression of steps, which must be successfully completed and met before advancing to the next step. Applicants will be notified after each step whether they will be permitted to continue in the selection process.

1. Application and questionnaire
2. Driving Record and verification of valid driver’s license
3. Physical Certification by Physician
4. Employment Application
5. Personal/Law Enforcement Interview
6. Background Investigation (including criminal history background check)
7. Conditional offer of employment
8. Psychological examination
9. Medical examination
10. Offer of employment

Dates, times and locations will be announced as you progress from step to step.
POSITION(S) APPLYING FOR

Please check the positions you wish to be considered for:

POLICE OFFICER ☐ SERGEANT ☐ LIEUTENANT ☐ CAPTAIN ☐

MINIMUM REQUIREMENTS FOR EACH POSITION ARE LISTED ON PAGE 6-7

REQUIREMENTS FOR POLICE OFFICER POSITION:

EDUCATION:

Graduation from a high school or vocational high school or possession of an approved high school equivalent certificate.

AGE:

Not less than 18 years of age at the announced closing date for filing applications for the position.

NOTE: Appointees who have not completed New Jersey's Basic Police Officer Program will be required to successfully complete a training program mandated by the New Jersey Police Training Commission within 12 months of appointment. Such training includes successful attainment of a satisfactory level of proficiency in the use of firearms. In addition, appointees must successfully complete agency training and a field training program.

LICENSE:

Appointees will be required to possess a driver's license valid in New Jersey.

SPECIAL QUALIFICATIONS:

NOTE: Appointees to this position must successfully qualify semi-annually in the use of firearms.

CITIZENSHIP:

Must be a citizen of the United States.

MEDICAL EXAMINATION:

As a prerequisite for appointment, appointees may be required to pass a thorough medical and psychiatric examination to be administered by the appointing authority. Any psychological, medical or physical condition or defect which would prevent efficient performance of the duties of the position, cause the appointee to be a hazard to himself/herself or others, or become aggravated as a result of performance of these duties, will be cause for rejection.

DRUG TESTING:

Drug screening through urinalysis is mandatory during pre-employment and again during training. A positive confirmation of the presence of illegal drugs in the applicant's urine, including steroids, will result in: (1) Rejection for employment; (2) Inclusion of applicant's positive testing in a central registry maintained by N.J.S.P. which information will be available through court order or should applicant again apply for future law enforcement employment; and (3) a bar from obtaining sworn law enforcement employment for a period of two years from the date of a positive confirmation test.

BACKGROUND INVESTIGATION:

Applicant must satisfactorily pass a thorough background investigation, including, but not limited to inquiries with the F.B.I., State Police, Local Police, Schools, Credit Bureau, Motor Vehicle Division, Military, Previous Employers, Family, Neighbors, and References etc.

RESIDENCY:

Applicant must be a resident of the State of New Jersey at time of appointment.

APPOINTMENT:

After completing testing and prior to appointment, the applicant must withdraw from consideration for employment from any other law enforcement agency and provide documentation of same. Also, the applicant must not be on a leave of absence from any law enforcement agency.

Signature of Candidate ___________________________ Date _______________ Page 6 of 50
There is a progression of steps which must be successfully completed and met before advancing to the next step in the process. The steps serve to measure the ability of the applicant and whether the applicant is suitable to advance in addition to verifying that the applicant also meets the qualifications. Applicants will be notified after each step whether they will be permitted to continue on.

**MINIMUM REQUIREMENTS FOR POLICE SERGEANT POSITION:**

Meet police officer requirements above and:

**EXPERIENCE:**

Three (3) years of experience as a sworn law enforcement officer with a recognized law enforcement agency in work involving the investigation of criminal activities and apprehension of violators of the law.

**MINIMUM REQUIREMENTS FOR POLICE LIEUTENANT POSITION:**

Meet police officer requirements above and:

**EXPERIENCE:**

Two (2) years of supervisory police experience as a sworn law enforcement officer with a recognized law enforcement agency, involving the providing of assistance and protection for persons, the safeguarding of property, the observance of the law, and the apprehension of law breakers.

**MINIMUM REQUIREMENTS FOR POLICE CAPTAIN POSITION:**

Meet police officer requirements above and:

**EXPERIENCE:**

Three (3) years of supervisory police experience as a sworn law enforcement officer with a recognized law enforcement agency, involving the providing of assistance and protection for persons, the safeguarding of property, the observance of the law, and the apprehension of law breakers.

*Note: All requirements are subject to and or superseded by the Civil Service Commission Pilot Order dated October 13, 2012*
CANDIDATE BACKGROUND INFORMATION AND DATA

1. LAST NAME   FIRST NAME   MIDDLE NAME

2. Date of Birth:   /   /   Telephone Number:   W/ AREA CODE

3. Social Security Number:   -   -   -

4. United States Citizen:  YES  NO

5. If the answer to Question 4 is No, are you a Naturalized Citizen?  YES  NO

6. By what means did you obtain Naturalized Citizenship?  SELF  SPOUSE  PARENTS

7. Has your name ever been changed for any reason?  YES  NO

If the answer to question #7 is Yes, please provide the following information:

Previous Name: Last, First, Middle

Reason For Change

Jurisdiction  Date

Signature of Candidate  Date  Page 8 of 50
8. Starting with your present address and listing them in reverse chronological order, list all places where you have lived for the past 20 years. Include P.O. Boxes, temporary addresses, and mailing addresses, if applicable. If additional space is needed, utilize the Additional Information Section.

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9. What classification type most closely represents the current status of your residency?

- [ ] Own home or similar residence.
- [ ] Rent/Lease home or similar residence
- [ ] Rent/Lease apartment, single room, dormitory, or similar unit
- [ ] Reside with parents, relative, friend, etc.

10. What is your marital status?

- [ ] Married
- [ ] Single
- [ ] Widow(er)
- [ ] Divorced
- [ ] Separated
- [ ] Civil Union
11. If you were raised by anyone other than your parents, please provide information concerning who raised you:

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12. List all persons that currently reside with you:

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13. List all immediate family members, including parents, siblings, children, and current/former spouses and domestic partners.

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<td>Criminal Record</td>
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<td>[ ] YES [ ] NO</td>
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<tr>
<td>Name (Last, First, MI)</td>
<td>Relationship</td>
<td>Home Phone</td>
<td>Work Phone</td>
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<tr>
<td>Complete Address</td>
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<td>Cell Phone</td>
<td>Criminal Record</td>
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<td>[ ] YES [ ] NO</td>
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<tr>
<td>Name (Last, First, MI)</td>
<td>Relationship</td>
<td>Home Phone</td>
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<td>Complete Address</td>
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<td>Cell Phone</td>
<td>Criminal Record</td>
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<td>[ ] YES [ ] NO</td>
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</tbody>
</table>

Signature of Candidate ___________________________ Date ___________________________
14. Do you own firearms?  □ YES  □ NO

15. If yes, please provide the below information:

<table>
<thead>
<tr>
<th>Handgun/Rifle/Shotgun</th>
<th>Make</th>
<th>Model</th>
<th>Caliber</th>
<th>Serial #</th>
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</table>

16. Do you possess a valid firearm I.D. Card?  □ YES  □ NO

17. If yes, what jurisdiction? ______________________________________________

18. What is the SBI# (or ID#) __________________________

19. Have you ever had a firearms ID, permit to purchase a handgun, or hunting license?
   □ YES  □ NO  Which one(s) __________________________________________

20. Have you ever had a firearms ID, permit to purchase a handgun, or hunting license seized/revoked?
   □ YES  □ NO  Which one(s) __________________________________________

21. Why? __________________________________________________________________

22. Have you ever had a firearms ID, permit to purchase a handgun, or hunting license denied?
   □ YES  □ NO  Which one(s) __________________________________________

23. Why? __________________________________________________________________
24. Have you ever had a permit to carry a firearm?  ☐ YES  ☐ NO

25. If yes, explain where, when, why?

26. Have you ever had a carry permit denied/seized/revoked?  ☐ YES  ☐ NO

27. If yes, explain where, when, why?
28. Date of current marriage/civil union: ______/______/______
   Month   Day   Year

29. Spouse’s/partner’s name?
   Last Name (Maiden Name, if Applicable)   First   Middle

30. Is your family aware of your intention of applying for a sworn law enforcement position?
   □ YES   □ NO

31. Have you ever been personally involved in a Domestic Violence incident? □ YES   □ NO

32. If yes, provide the following information:

   Jurisdiction: City/County/State   Date   Docket #   Case #

33. Have you ever been served with a domestic violence restraining order?
   □ YES   □ NO   If yes, how many times? ________

<table>
<thead>
<tr>
<th>County</th>
<th>State</th>
<th>Type of Order</th>
<th>Date</th>
<th>Disposition</th>
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</table>

Signature of Candidate ___________________ Date ___________________
34. List chronologically by age, all of your children regardless of dependency and residence:

<table>
<thead>
<tr>
<th>Name (Last, First, Middle)</th>
<th>Gender</th>
<th>Date of Birth</th>
<th>Dependent?</th>
<th>Child lives with you?</th>
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<td>□ YES □ NO</td>
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</tbody>
</table>

35. Are you responsible for child support for any child listed above? □ YES □ NO

Number of Dependents ____________________________ Amount of Support: Indicate Payment Schedule (Weekly, Monthly, etc.)

36. Are you responsible for the payment of alimony or any other type of court ordered assistance? □ YES □ NO

Amount of Alimony: Indicate Payment Schedule (Weekly, Monthly, etc.)

37. Has any legal action of any kind, civil, criminal, or administrative, been taken against you for failure to make any payments of support or alimony? □ YES □ NO

If yes, complete the following table:

<table>
<thead>
<tr>
<th>Type of Support</th>
<th>Jurisdiction</th>
<th>Amount in Arrears</th>
<th>Confinement</th>
<th>Length of Confinement</th>
<th>Disposition</th>
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<tr>
<td>Child/Alimony</td>
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<td>□ YES □ NO</td>
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</table>

Signature of Candidate ____________________________ Date ____________________________

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38. Have you ever been involved in a paternity proceeding?  □ YES  □ NO
   If yes, provide details: ________________________________
   __________________________________
   __________________________________

39. Have you ever been evicted from a place of residence?  □ YES  □ NO
   If yes, provide details: ________________________________
   __________________________________
   __________________________________

40. List all previous marriage(s).  □ NONE

<table>
<thead>
<tr>
<th>Name of Former Spouse</th>
<th>Street Address, City, State, Zip</th>
<th>Date of Birth</th>
<th>Telephone Number(s)</th>
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</table>

41. List current dating partner(s):  □ NONE

<table>
<thead>
<tr>
<th>Name &amp; Social Security #</th>
<th>Street Address, City, State, Zip</th>
<th>Date of Birth</th>
<th>Telephone Number(s)</th>
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</table>

42. List previous dating partner(s):  □ NONE

<table>
<thead>
<tr>
<th>Name &amp; Social Security #</th>
<th>Street Address, City, State, Zip</th>
<th>Date of Birth</th>
<th>Telephone Number(s)</th>
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</tbody>
</table>
43. Have there been any domestic violence issues with present/past dating partners?

☐ YES    ☐ NO

If yes, provide details:

__________________________________________________________________

__________________________________________________________________

44. Has your spouse, fiancée, significant other, current or past dating partner ever been arrested, interviewed, detained, or convicted by any law enforcement agency?

☐ YES    ☐ NO

If yes, provide details: ____________________________________________

__________________________________________________________________

__________________________________________________________________

45. Has your spouse, fiancée, significant other, current or past dating partner ever called the police on you for any reason?

☐ YES    ☐ NO

If yes, provide details: ____________________________________________

__________________________________________________________________

__________________________________________________________________

46. Have the police ever been called to any home or residence in which you have ever resided?

☐ YES    ☐ NO

If yes, provide details: ____________________________________________

__________________________________________________________________

__________________________________________________________________

47. Have you ever viewed, purchased, possessed, or downloaded child pornography?

☐ YES    ☐ NO

If yes, provide details: ____________________________________________

__________________________________________________________________

Signature of Candidate ___________________________ Date ___________________
EDUCATIONAL BACKGROUND DATA

The information requested in this section relates to all phases of your educational background. It is necessary to list in proper chronological order ALL high schools, trade schools, 2 & 4 year colleges or universities attended, and the degree(s) awarded:

48. Have you been awarded a high school diploma?  □ YES  □ NO  ___ Year ___

49. Have you been awarded a G.E.D. certificate?  □ YES  □ NO  ___ Year ___

50. If you had been awarded a G.E.D. certificate, please provide the following:

State of Issue  Date of Issue  Certificate Number

51. Has your education ever been interrupted or terminated for any reason?

□ YES  □ NO

If yes, briefly describe the reason for the interruption or termination of your education:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

52. Have you ever been suspended or expelled from any educational institution for any reason?

□ YES  □ NO

If yes, explain:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

53. Are you in default or arrears on any student loan?  □ YES  □ NO

If yes, explain:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
54. List in reverse chronological order, all schools that you have attended starting with your most recent:

<table>
<thead>
<tr>
<th>From Month/Year</th>
<th>To Month/Year</th>
<th>Name of School</th>
<th>Street Address</th>
<th>Degree Attained</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>
55. Have you ever served in any branch of the U.S. Military or related organization?

☐ YES  ☐ NO

If yes, provide the following information:

From: _____/_____/_____  To: _____/_____/_____

Branch: ___________________  Serial Number: ___________________

Rank Upon Discharge: _______________  Job/MOS: ___________________

Type of Discharge (Be specific): ______________________________________

Reason for Discharge: _____________________________________________

(If you had more than one commission/enlistment, explain in the Additional Information Section.)

56. Has your discharge or separation ever been changed, upgraded, downgraded, or corrected?

☐ YES  ☐ NO

If yes, changed from _______________ to _______________

Authority: _______________ Who requested the change: _______________

Reason for Change: _______________________________________________

57. Were you ever reprimanded, disciplined, tried, punished, demoted, attended Captain's Mast, received an Article 15, etc. for any infraction of military rules, law, or regulations?

☐ YES  ☐ NO

58. If yes, complete this section:

<table>
<thead>
<tr>
<th>Date</th>
<th>Charge/Proceeding</th>
<th>Disposition</th>
<th>Penalty</th>
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Signature of Candidate ___________________  Date ____________

Page 21 of 50
59. Are you now or have you ever been an active member of any branch of the United States Military Reserve or State National Guard?

☐ YES  ☐ NO

If yes, provide the following information:

From: _____/_____/_____  To: _____/_____/_____

Branch: ____________________________  Serial Number: ____________________________

Rank Upon Discharge: ____________________________  Job/MOS: ____________________________

Type of Discharge (Be specific): ____________________________

Reason for Discharge: ____________________________

60. Have you ever served in any military organization of any foreign government?

☐ YES  ☐ NO

If yes, provide details:

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

61. Have you ever been denied/refused entry into any of the United States Military, Military Reserve, or National Guard?

☐ YES  ☐ NO

If yes, explain the basis for your denial (EXCEPT IF FOR MEDICAL REASONS)

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________
62. Have you ever been detained, investigated, arrested or charged by any law enforcement officer, agency, or citizen as an adult for any crime, disorderly person offense, petty disorderly person offense, administrative code, or violation of local ordinance?

☐ YES  ☐ NO

If yes, provide information below:

<table>
<thead>
<tr>
<th>Date</th>
<th>Court/Location</th>
<th>Original Charge</th>
<th>Final Charge</th>
<th>Disposition</th>
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63. Have you ever received a summons commanding your appearance in court? (Other than a traffic summons)

☐ YES  ☐ NO

If yes, provide information below:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

64. Have you ever been involved as a plaintiff or defendant in any civil proceeding?

☐ YES  ☐ NO

If yes, provide information below:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

65. Were you ever fingerprinted?  ☐ YES  ☐ NO

If yes, provide the following information:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Signature of Candidate ___________________________ Date ___________________________
66. Have you ever had any records expunged?

☐ YES  ☐ NO

If yes, provide details:
__________________________________________

67. Can you safely operate a motor vehicle?  ☐ YES  ☐ NO

68. Do you possess a valid New Jersey Driver’s License?  ☐ YES  ☐ NO

Driver’s License Number: ________________________________

What classes of vehicle(s) are you licensed to operate? _____________________________

69. Have you ever possessed a driver’s license from a state other than New Jersey?

☐ YES  ☐ NO

If yes, complete the following:

<table>
<thead>
<tr>
<th>State</th>
<th>Dates</th>
<th>License Number</th>
<th>Status</th>
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<tbody>
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</table>

70. Have your driving privileges ever been revoked or suspended in this or any state?

☐ YES  ☐ NO

If yes, complete the following:

<table>
<thead>
<tr>
<th>State</th>
<th>From</th>
<th>To</th>
<th>Reason</th>
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</tbody>
</table>
71. Have you ever been refused a driver's license from any state?  □ YES  □ NO
   
   If yes, provide details:
   
   72. Have your motor vehicle registration privileges ever been suspended/revoked in this or any other state?
      □ YES  □ NO
      
      If yes, provide details:
      
      73. Do you have any outstanding/unsold summonses against you for any moving or parking violation?
         □ YES  □ NO
         
         If yes, provide details:
         
         74. Have you received a moving violation summons in the last 5 years?  □ YES  □ NO
            
            If yes, provide information on each and every summons:

<table>
<thead>
<tr>
<th>Date</th>
<th>Charge/Violation</th>
<th>Jurisdiction</th>
<th>Penalty</th>
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75. Have you ever been stopped, detained, arrested or charged with any violation for Driving While Under the Influence of Alcohol or Drugs?

☐ YES  ☐ NO

If yes, provide details (date, location, jurisdiction, disposition):


76. Do you currently have any penalty points against your driver's license?

☐ YES  ☐ NO  If yes, how many: ____________

77. Do you own or lease a motor vehicle?  ☐ YES  ☐ NO

If yes, you must provide a copy of all vehicle registrations, lease agreements, and proof of insurance for any vehicle owned or leased by you.

78. Do you regularly operate a motor vehicle belonging to another for your personal use?

☐ YES  ☐ NO

If yes, complete the below section:

<table>
<thead>
<tr>
<th>Make</th>
<th>Model</th>
<th>License Plate &amp; State</th>
<th>Owner</th>
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Signature of Candidate ___________________________ Date ___________________________  Page 26 of 50
79. Have you ever been fired, terminated, asked to leave, laid off, or resign or quit under questionable circumstances; or has any form of disciplinary action ever been taken against you by an employer:

☐ YES  ☐ NO

If yes, please provide details:


80. List all current and former employers, including full-time, part-time, seasonal, under-the-table employment and periods of unemployment over 30 days in the last 20 years. List employers in reverse chronological order beginning with your present employer and work backwards. Include within the sequence any period of active military service. If you were discharged or were requested to resign by an employer, answer so in the reason for leaving section.

a. Employer #1: ________________________________

Address: ____________________________________________

Street                                City           State      Zip

Telephone #: __________________________ □ Full Time  □ Part Time

Employed from: __________________________ to __________________________

Position/Title: __________________________ Supervisor’s Name: __________________________

Weekly Salary: __________________________ Hours per week: __________________________

Reason for Leaving: __________________________

b. Employer #2: ________________________________

Address: ____________________________________________

Street                                City           State      Zip

Telephone #: __________________________ □ Full Time  □ Part Time

Employed from: __________________________ to __________________________

Position/Title: __________________________ Supervisor’s Name: __________________________

Weekly Salary: __________________________ Hours per week: __________________________

Reason for Leaving: __________________________
c. Employer #3: ____________________________________________________________

Address: ____________________________________________________________

Street    City    State    Zip

Telephone #: __________________   □ Full Time   □ Part Time

Employed from: __________________ to __________________

Position/Title: __________________ Supervisor's Name: __________________

Weekly Salary: _______________ Hours per week: _______________

Reason for Leaving: _________________________________________________

d. Employer #4: _______________________________________________________

Address: ____________________________________________________________

Street    City    State    Zip

Telephone #: __________________   □ Full Time   □ Part Time

Employed from: __________________ to __________________

Position/Title: __________________ Supervisor's Name: __________________

Weekly Salary: _______________ Hours per week: _______________

Reason for Leaving: _________________________________________________

e. Employer #5: _______________________________________________________

Address: ____________________________________________________________

Street    City    State    Zip

Telephone #: __________________   □ Full Time   □ Part Time

Employed from: __________________ to __________________

Position/Title: __________________ Supervisor's Name: __________________

Weekly Salary: _______________ Hours per week: _______________

Reason for Leaving: _________________________________________________

Signature of Candidate ____________________________ Date ________________
f. Employer #6: ________________________________

Address: ____________________________

Street                  City                  State      Zip

Telephone #: ________________

☐ Full Time ☐ Part Time

Employed from: ________________ to ________________

Position/Title: ________________ Supervisor's Name: ________________

Weekly Salary: ________________ Hours per week: ________________

Reason for Leaving: ____________________________________________________________________________________


g. Employer #7: ________________________________

Address: ____________________________

Street                  City                  State      Zip

Telephone #: ________________

☐ Full Time ☐ Part Time

Employed from: ________________ to ________________

Position/Title: ________________ Supervisor's Name: ________________

Weekly Salary: ________________ Hours per week: ________________

Reason for Leaving: ____________________________________________________________________________________


h. Employer #8: ________________________________

Address: ____________________________

Street                  City                  State      Zip

Telephone #: ________________

☐ Full Time ☐ Part Time

Employed from: ________________ to ________________

Position/Title: ________________ Supervisor's Name: ________________

Weekly Salary: ________________ Hours per week: ________________

Reason for Leaving: ____________________________________________________________________________________
CONTROL #: ________________ CAMDEN COUNTY POLICE DEPARTMENT
EMPLOYMENT APPLICATION

i. Employer #9: __________________________________________

Address: _____________________________________________

Street                City                State                Zip

Telephone #: ________________ □ Full Time □ Part Time

Employed from: ________________ to ________________

Position/Title: ______________________ Supervisor’s Name: ________________

Weekly Salary: ________________ Hours per week: ________________

Reason for Leaving: __________________________________________

j. Employer #10: __________________________________________

Address: _____________________________________________

Street                City                State                Zip

Telephone #: ________________ □ Full Time □ Part Time

Employed from: ________________ to ________________

Position/Title: ______________________ Supervisor’s Name: ________________

Weekly Salary: ________________ Hours per week: ________________

Reason for Leaving: __________________________________________

k. Employer #11: __________________________________________

Address: _____________________________________________

Street                City                State                Zip

Telephone #: ________________ □ Full Time □ Part Time

Employed from: ________________ to ________________

Position/Title: ______________________ Supervisor’s Name: ________________

Weekly Salary: ________________ Hours per week: ________________

Reason for Leaving: __________________________________________
81. I the undersigned, declare that I am over eighteen years of age, I have personally known the applicant for at least one year and I believe the applicant should be considered for employment as a police officer. I will upon request, give further information regarding my knowledge of the applicant.

a. Reference #1: ________________________________

   Home Address ________________________________
   Telephone(s) ________________________________
   HOME WORK CELL

   Work Address ________________________________
   How long have you known this person: __________
   Is the applicant of good character and reputation: ☐ YES ☐ NO
   Reference Signature: __________________________ Date: __________________

b. Reference #2: ________________________________

   Home Address ________________________________
   Telephone(s) ________________________________
   HOME WORK CELL

   Work Address ________________________________
   How long have you known this person: __________
   Is the applicant of good character and reputation: ☐ YES ☐ NO
   Reference Signature: __________________________ Date: __________________

c. Reference #3: ________________________________

   Home Address ________________________________
   Telephone(s) ________________________________
   HOME WORK CELL

   Work Address ________________________________
   How long have you known this person: __________
   Is the applicant of good character and reputation: ☐ YES ☐ NO
   Reference Signature: __________________________ Date: __________________

Signature of Candidate __________________________ Date __________________
82. Have you ever collected unemployment benefits that you were not entitled to receive?

☐ YES  ☐ NO

If yes, please provide details: ____________________________________________

83. Have you ever applied for any criminal justice position?

☐ YES  ☐ NO

If yes, please provide details: ____________________________________________

84. Have you ever been rejected from a criminal justice position?

☐ YES  ☐ NO

If yes, please provide details: ____________________________________________

85. Have you ever applied for or been rejected from any other civil service, federal, state, county, or municipal government position?

☐ YES  ☐ NO

If yes, please provide details: ____________________________________________

86. Have you ever been a member of any organized crime enterprise, street gang, or motorcycle gang or crew?

☐ YES  ☐ NO

If yes, please provide details: ____________________________________________

87. Have you ever been discharged, terminated, furloughed, laid off or asked to resign from any employment?

☐ YES  ☐ NO

If yes, please provide details: ____________________________________________

Signature of Candidate ___________________________ Date ___________________________
88. Do you have any knowledge or any information in addition to that specifically requested in this application that is or may be relevant directly or indirectly to this background investigation and/or your eligibility for the position that you have applied for?

☐ YES  ☐ NO

If yes, please provide details:________________________________________________________________________

__________________________________________________________________________________________

89. List all your email addresses ________________________ ________________ ________________

90. Do you have any social media accounts?

☐ YES  ☐ NO

If yes, please provide details:________________________________________________________________________

__________________________________________________________________________________________

91. Are you affiliated with any internet websites?

☐ YES  ☐ NO

If yes, please provide details:________________________________________________________________________

__________________________________________________________________________________________

92. Do you have any foreign language skills?

☐ YES  ☐ NO

If yes, please explain what language(s) & level of fluency: ____________________________________________

__________________________________________________________________________________________

☐ READ    ☐ WRITE    ☐ SPEAK

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

Note: You may be requested to participate in a language certification exercise that will verify your fluency level.
93. Have you ever smoked, experimented with, tasted, ingested, used, injected, sniffed, etc. any of the following:

<table>
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<tr>
<th>Substance (circle each as applicable)</th>
<th>Yes</th>
<th>No</th>
<th>Date month/year</th>
<th># of times used / appx. amount</th>
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<tr>
<td>Marijuana / Hashish</td>
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<td>Cocaine / Powder</td>
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<td>Cocaine / Crack</td>
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<td>Opium Derivative (Heroin, Morphine, codeine, etc.)</td>
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<td>Amphetamines (Speed)</td>
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<td>Barbiturates (Reds/Downers)</td>
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<td>Inhalants (Glue, solvents, aerosols, whippl, etc.)</td>
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<td>Anabolic Steroids</td>
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<td>Hallucinogenic (LSD, PCP, mushrooms, Ecstasy, etc.)</td>
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<td>Quaaludes, Valium, Darvocet, Dilaudid, Percocet, Percodan, etc.</td>
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<td>Club drugs, diet pills, pharmaceuticals</td>
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<tr>
<td>Any other drug/narcotic not specifically listed above.</td>
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</table>

Have you ever purchased/bought any of the above listed substances?

94. Have you ever been investigated, arrested or charged with any type of drug/narcotic related violation?  
☐ YES  ☐ NO

95. Have you ever used prescription medication that was prescribed to another person & not you?  
☐ YES  ☐ NO

96. Have you ever sold, distributed, or provided any person with or without their permission or consent any type of illegal drug/narcotic?  
☐ YES  ☐ NO

97. Have you ever participated in the production, manufacture, growing, delivery, transportation, smuggling, storage, or handling of any illegal drugs/narcotics for yourself or anyone else?  
☐ YES  ☐ NO

98. Have you ever made any money or profit in any way from your involvement in drugs/narcotics?  
☐ YES  ☐ NO
99. Have you ever inhaled, used, tried, tasted, injected, experimented with, or had anything else to do with any illegal drug/narcotic, other than what you have already listed in this book?
☐ YES  ☐ NO

If you answered yes to any of these questions, you are required to provide a full explanation in the Additional Information Section. Include dates and amounts involved.

100. Do you gamble? ☐ NEVER  ☐ Seldom  ☐ Occasionally  ☐ Regularly

If so, on what: ____________________________

101. Have you ever been issued a criminal citation for any type of alcohol related violation?
☐ YES  ☐ NO

If yes, please provide details: ____________________________

102. Have you ever purchased alcohol for a minor?
☐ YES  ☐ NO

If yes, please provide details: ____________________________

103. Do you have experience as a sworn police/law enforcement?
☐ YES  ☐ NO

If yes, explain to include agency, position, length of service ____________________________

104. Do you have any experience in private security?
☐ YES  ☐ NO

If yes, explain to include agency, position, length of service ____________________________

105. Do you have experience as an intern, volunteer, cadet, or explorer with this agency or any other law enforcement or public safety agency?
☐ YES  ☐ NO

Signature of Candidate ____________________________ Date ____________________________
If yes, please provide details: ____________________________________________

106. Do you have any experience as a member (paid or volunteer) of any fire department or rescue squad?

☐ YES  ☐ NO

If yes, please provide details: ____________________________________________

107. Are you currently attending or have you attended any police academy in the past or received any law enforcement training?

☐ YES  ☐ NO

If yes, please provide details: ____________________________________________

108. Do you personally know any Camden County Police Officers?

☐ YES  ☐ NO

If yes, list names below and how long you’ve known them ______________________

109. Do you have any family members or relatives who are current or past members of a law enforcement agency?

☐ YES  ☐ NO

If yes, list your relationship and their department/agency: ______________________

110. Have you ever applied for a position with any federal, state or local law enforcement agency or fire department?

☐ YES  ☐ NO

If yes, please provide details: ____________________________________________

111. Have you ever applied for any position with the federal government for which a background investigation was initiated?

Signature of Candidate ___________________________ Date ____________

Page 36 of 50
112. Have you ever been denied employment by any organization covered in questions #110 and #111?

☐ YES  ☐ NO

If yes, please provide details: ________________________________

113. Has the United States government ever granted you a security clearance?

☐ YES  ☐ NO

If yes, please provide details: ________________________________

114. List all law enforcement agencies and fire departments with whom you have applied. List all steps that you have completed with each agency (written test, oral interview, polygraph, background completed, physical agility, medical, psychological, etc.); also list your final status. If you have applied to the same agency more than once, list each time separately. Also include each occasion you have applied to the Camden County Police Department.

<table>
<thead>
<tr>
<th>Department</th>
<th>Date Applied</th>
<th>Steps taken</th>
<th>Investigators</th>
<th>Telephone #s</th>
<th>Status</th>
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Signature of Candidate __________________________ Date ______________ Page 37 of 50
115. Do you have any computer skills or experience?

☐ YES  ☐ NO

If yes, please provide details. Include hardware/software applications and general competency level of each:

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

116. If you are employed as a police officer by this agency, how long do you anticipate remaining with us?

______________________________________________________________________________

117. Did anyone provide advice, guidance or other assistance to you in regards to the completion of this confidential questionnaire booklet?

☐ YES  ☐ NO

If yes, please provide details:______________________________________________________________________________
CURRENT AND FORMER POLICE OFFICERS
This section only applies to current and former police officers.

118. With what Police/Law Enforcement agency are you currently employed or formerly employed by?

__________________________________________________________________________

__________________________________________________________________________

119. What are/were the dates of your employment: From ___/___/___ to ___/___/___

120. Have you been the subject of any internal investigations or citizen complaint in the last five years?

☐ YES  ☐ NO

If yes, explain in full all circumstances: ______________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Disposition: ______________________________________________________________

121. Have you ever been suspended from duty, with or without pay, for any reason, except for medical reasons?

☐ YES  ☐ NO

If yes, explain in full all circumstances: ______________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Signature of Candidate ___________________________ Date ________________________
122. Have you ever been subject to any departmental disciplinary actions?

☐ YES  ☐ NO

If yes, explain in full all circumstances: ____________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

123. What assignments, special training, and skills do you have as a police officer, and how long have the assignments lasted? (Skills include radar, FTO, breathalyzer operator, DWI, Drug Recognition Expert, detective, etc.)
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

124. How would you rate your overall work performance as compared to other members of your current/past agency?

☐ Excellent
☐ Above Average
☐ Average
☐ Below Average
☐ Unsatisfactory

Explain your rationale:
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
125. How would you rate your contribution to proactive crime prevention and problem solving efforts during the last six-months as compared to other members of your current/past agency?

☐ Excellent  ☐ Above Average  ☐ Average  ☐ Below Average  ☐ Unsatisfactory

Explain your rationale:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

126. Have you ever given an untruthful statement in court or to your current/past agency?

☐ YES  ☐ NO

If yes, explain in full all circumstances: _________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

127. Have you ever been charged or investigated for the use of excessive force or police brutality?

☐ YES  ☐ NO

If yes, explain in full all circumstances including date(s), location(s), type of call(s), investigator, and disposition(s):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
128. Please explain the reason(s) why you want to leave your current employer, or why you left your previous law enforcement employer:

__________________________________________

__________________________________________

__________________________________________

__________________________________________

__________________________________________

129. Have you ever been disciplined for unsatisfactory attendance by your current/past agency?

☐ YES  ☐ NO

If yes, explain in full all circumstances: __________________________________________

__________________________________________

__________________________________________

__________________________________________

130. Have you ever been investigated by your current/past agency for any allegation of domestic violence or spousal abuse?

☐ YES  ☐ NO

If yes, explain in full all circumstances: __________________________________________

__________________________________________

__________________________________________

__________________________________________
ADDITIONAL INFORMATION SECTION
This section should be utilized to provide detailed information that may be required for specific individual questions that you have previously answered. Failure to provide the required details may be grounds for rejection from the position you have applied for.

When completing this section, make sure that you relate the specific question to the answer. Place a large "X" through unused lines.

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Signature of Candidate ___________________________ Date ____________

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PERSONAL HISTORY STATEMENT AFFIRMATION

I hereby affirm that this Application/Personal History Statement is true and correct and contains no misrepresentations, falsifications, omissions of material facts or concealment's of material facts. Additionally the information provided by me is true, accurate, and complete to the best of my knowledge and belief.

I am cognizant that statements made by me on this Application/Personal History Statement are subject to later investigation. Additionally, I realize that should any investigation disclose any misrepresentation, misstatement, falsification, omission or concealment of material fact, my application for the position is subject to rejection and my name will be removed from the eligibility list. If I have been already appointed to the position, I will be subject to dismissal.

I further understand that if there are any changes in my application answers from the date of my original application to the Camden County Police Department and to the date of any scheduled appointment, I will notify the Camden County Police Department of those changes, and if I fail to do so, I realize it is grounds for non-selection or dismissal from my position.

"By my signature below I state that I have read and understood the above warning, and all information provided by me is true, complete, and accurate."

______________________________  ________________________
Signature of Candidate           Date

Notary Certification in this Block

Signature of Candidate ___________ Date _______________  Page 47 of 50
CANDIDATE'S RELEASE FOR MILITARY INFORMATION & RECORDS

I authorize the National Personnel Records Center, St. Louis, MO or any other custodian of my military records to release information and provide photocopies of my complete military personnel records regardless of type or classification. This information shall include but is not limited to enlistment information, discharge or separation information, disciplinary record, criminal records, DD214(s), performance and appraisal records, award records and financial records.

I hereby provide permission for the release of records and information and forever discharge and hold harmless any person or entity for the disclosure of said military records to:

Camden County Police Department
6 Collier Drive, Lakeland Complex
Blackwood, NJ 08012
Attn: Applicant Investigation Unit

Signature of Candidate ___________________________ Date ____________

Print Name: Last ___________ First ___________ Middle _______

Social Security Number ____________________________

Branch of Service ____________________________ Date of Birth ____________

Date of Service: From ___________ to ___________

Notary Signature ____________________________ Print Name Last ___________ First ___________ Middle _______

NOTARY SEAL

(A photo copy of this authorization will be considered as effective and valid as the original.)
I, __________________________________________, understand that as part of the pre-
employment process, the Camden County Police Department will conduct a
comprehensive background investigation in an effort to determine my suitability to fill the
position for which I have applied. I further understand that as part of the pre-
employment process, I will be required to submit to and perform certain medical and
physical examinations. In accordance with the efforts of the Camden County Police
Department to select only those most suitable for law enforcement, I do hereby consent
to the sampling and submission for testing of my urine for the purpose of drug
screening. I understand that a negative result is a condition of employment.

I also understand that refusing to supply the required samples or producing a
positively confirmed test result for the presence of illegal drugs will result in the rejection
of my application for employment. I understand that in the case of a positive test result,
my name will be forwarded to a central registry maintained by the Division of State
Police and will be made available only upon court order or as part of a background
investigation for a law enforcement position. I understand that a confirmed positive test
result indicating the presence of drugs will bar me from securing future law enforcement
employment for a period of two years.* I understand that after this two year period, a
positive test result may be considered in evaluating my fitness for future law
enforcement employment.

I understand that the results of the urinalysis will be provided to me as soon as
possible after receipt by the Camden County Police Department.

I hereby acknowledge receipt of a copy of the methods and procedures for drug
screening applicants for sworn law enforcement positions.

_________________________________________    ____________________________
Signature of Applicant                        Date

_________________________________________    ____________________________
Signature of Notary                            Date

Print Notary Name:  Last   First   Middle

SEAL

_________________________________________    ____________________________
Signature of Candidate                        Date
CANDIDATE'S RELEASE OF REPORTS TO CIVIL SERVICE COMMISSION

I authorize the County of Camden County Police Department to release the results of criminal background information and medical reports to the New Jersey Civil Service Commission to support employment decisions in comportment with NJAC 13:59-1.2(b).

I hereby provide permission for the release of these records and information and forever discharge and hold harmless any person or entity for the disclosure of said records.

__________________________  ________________
Signature of Candidate      Date

Print Name:  Last    First    Middle

__________________________
Social Security Number

__________________________
Date of Birth

__________________________  _____________________  _____________________
Notary Signature        Print Name    Last    First    Middle

NOTARY SEAL

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