



Mendham Borough Police

3 Cold Hill Road South
Mendham, NJ 07945
E-mail: MBPD@mendhamnj.org



Dispatch: 973-543-2527

Fax: 973-543-9774

HQ: 973-543-2993

MENDHAM BOROUGH POLICE DEPARTMENT EMPLOYMENT APPLICATION

Date of Application: _____

Name: _____

Last

First

Middle Initial

Position: (Check One)

1. Police Officer _____
2. School Crossing Guard _____
3. Secretarial _____
4. Other (Specify) _____

Instructions

1. All applications must be completed in their entirety. If questions are not answered the application will be voided. If the question does not apply to you, mark N/A in the space provided.
2. Applications must be typed or printed neatly using a ballpoint pen.

Employment Data

Present Employer:

| | | |
|-----------|----------------|-----------------------|
| Name | Street Address | City, State, Zip Code |
| Telephone | Date Hired | Current Annual Salary |
| | | Immediate Supervisor |

Former Employer(s): Please list all former employment, beginning with the most recent position.

1.

| | | |
|----------------------|--------------------|------------------|
| Name | Street Address | City, State, Zip |
| Telephone | Date Hired | Date Left |
| | | Annual Salary |
| Immediate Supervisor | Reason For Leaving | |

2.

| | | |
|----------------------|--------------------|------------------|
| Name | Street Address | City, State, Zip |
| Telephone | Date Hired | Date Left |
| | | Annual Salary |
| Immediate Supervisor | Reason For Leaving | |

3.

| | | |
|----------------------|--------------------|------------------|
| Name | Street Address | City, State, Zip |
| Telephone | Date Hired | Date Left |
| | | Annual Salary |
| Immediate Supervisor | Reason For Leaving | |

Military Data

Branch of Military Service _____

Date of Enlistment _____

References

List six (6) people that know you well enough to provide personal information about you. **Do not** list relatives.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

I hereby certify that the information on this application is correct. I understand that if a background investigation reveals any willful misrepresentation, this application will automatically be rejected.

Signature

Date

Please attach the following:

Academic Transcripts _____

Reviewed By:

Background Investigator



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BOROUGH OF MENDHAM BACKGROUND INVESTIGATION RELEASE AND WAIVER OF LIABILITY FORM

To all Courts, Probation Departments, Selective Service Boards, Employers, Educational, and other Institutions and Agencies without exception.

I, _____, am applying for employment with the Borough of Mendham. Pursuant to Section 10-1 et seq. of the Borough Code, an investigation is being conducted to determine my eligibility.

The intent of this authorization is to permit all former employers identified in my employment application to provide, and for the Borough of Mendham to obtain, full and free access to ALL records with the specific purpose of permitting the Borough of Mendham to conduct a thorough background investigation of me. It is my specific intent to provide the Borough of Mendham with access to personnel information.

I hereby authorize the Borough of Mendham and its designated agents and representatives to conduct a comprehensive review of my background causing written reports to be generated for employment purposes. I understand that the scope of the reports may include, but is not limited, to the following areas: verification of social security number; current and previous residences; and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation, or public agency to divulge any and all information, verbal or written, pertaining to me, to the Borough of Mendham or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources.

I hereby release, discharge, and exonerate, the Borough of Mendham, its agents and representatives, and any person or agency so furnishing information, from any and all liability of every nature and kind arising out of the furnishing, inspection or collection of such documents, records, and other information, or the investigation made by the Borough of Mendham.

I, the undersigned, have carefully read the foregoing release and know and understand the contents thereof. I sign this release freely and voluntarily, with full knowledge of its significance, intending to be legally bound thereby.

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

Date: _____

Signature: _____

Witness: _____