

**BOROUGH OF BERGENFIELD**  
**198 North Washington Avenue, Bergenfield, NJ 07621**  
**Telephone (201) 387-4055**

**EMPLOYMENT APPLICATION**

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Social Security # \_\_\_\_\_

1. (a) Position (s) for which you are applying \_\_\_\_\_

(b) How did you learn about this opening? \_\_\_\_\_

2. Are you legal age to work? \_\_\_\_\_

3. Have you ever been convicted of a crime, including: Yes \_\_\_\_\_ No \_\_\_\_\_  
Disorderly Persons and Petty Disorderly Persons Offenses?

If Yes, explain: \_\_\_\_\_

Do you have a valid New Jersey Driver's License? \_\_\_\_\_

Currently licensed in other state? \_\_\_\_\_

Do you hold any special class motor vehicle license(s)? \_\_\_\_\_

Has your driving privilege been revoked/suspended due to a  
Violation under NJS Title 30, or similar motor vehicle statute  
in another state? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, explain \_\_\_\_\_

You will not be denied employment solely because of a conviction record unless the offense is related to the job for which you have applied.

4. Are you currently employed? Yes \_\_\_\_\_ No \_\_\_\_\_

5. May we contact your present employer? Yes \_\_\_\_\_ No \_\_\_\_\_

6. What date will you be available to work? \_\_\_\_\_

7. Are you prevented from lawfully becoming employed in this  
Country because of Visa or Immigration Status? Yes \_\_\_\_\_ No \_\_\_\_\_  
(Proof of citizenship will be required upon employment)

8. Are you currently on "Lay-Off" status and subject to recall? Yes \_\_\_\_\_ No \_\_\_\_\_
9. Have you every filed an application with us before? Yes \_\_\_\_\_ No \_\_\_\_\_
10. Did you serve in the United States Armed Services? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, Please Provide the following:

Branch of Service \_\_\_\_\_ Rank \_\_\_\_\_

Date of Discharge \_\_\_\_\_ Type of Discharge \_\_\_\_\_

Specialized Training \_\_\_\_\_

Your Resume May be Substituted for the Following Information

**EDUCATION**

School Name and Location	Number of Years	Degree/Graduate/Diploma
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College(s)

High School (or other)

**REFERENCES**

Please provide the name of 3 references who we may contact:

Name/Relationship/Address/Daytime Telephone

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Describe any specialized job-related training, apprenticeship, skills and extra-curricular activities.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Awards, Honors, Misc: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PAST EMPLOYMENT

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

Supervisor \_\_\_\_\_ Salary \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

May we contact the employer? Yes \_\_\_\_\_ No \_\_\_\_\_

Describe your job and duties \_\_\_\_\_

\_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

Supervisor \_\_\_\_\_ Salary \_\_\_\_\_

May we contact the employer? Yes \_\_\_\_\_ No \_\_\_\_\_

Describe your job and duties \_\_\_\_\_

\_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

Supervisor \_\_\_\_\_ Salary \_\_\_\_\_

May we contact the employer? Yes \_\_\_\_\_ No \_\_\_\_\_

Describe your job and duties \_\_\_\_\_

\_\_\_\_\_

**SKILLS AND EQUIPMENT**

**Please list skills and equipment operated:  
(Example: PC, Word Processing, Fax, Calculator, Typewriter, etc., and special certifications for  
specific equipment)**

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**ADDITIONAL INFORMATION**

**Please state any additional information you feel may be helpful to us in considering your application.**

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**CERTIFICATION AND AUTHORIZATION**

**I hereby certify that the statements made by me herein are complete and true to the best of  
my knowledge.**

\_\_\_\_\_  
**Signature of Applicant**

**I authorize the Borough of Bergenfield and/or its representative to investigate all the  
statements contained in this Application for Employment as may be necessary for the employment  
decision. In the event of employment, I further understand that false or misleading information given  
in my application or interview(s) may result in discharge. I understand also, that I am required to  
abide by all rules and regulations of the employer.**

\_\_\_\_\_  
**Signature of Applicant**

**The Borough of Bergenfield is an Equal Opportunity Employer  
Subject to all Civil Service requirements and regulations**

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Michael T. Carr  
Chief of Police

Borough of Bergenfield  
Police Department  
198 N. Washington Ave.  
Bergenfield, NJ 07621

Phone  
201-387-4000  
Fax  
201-387-0141

### AUTHORIZATION TO RELEASE INFORMATION

To Whom it May Concern;

I hereby authorize any police officer of the Bergenfield Police Department, bearing this release, or copy of this release, to check any criminal history, driving record and driving status, and any provided references, based on my name, date of birth and social security number provided on the Application for Peddler Permit for the Borough of Bergenfield, Bergen County, New Jersey. I understand a check will be made in the following areas:

- NCIC/SCIC Wanted Persons
- Automated Complaint System (ATS)
- Automated Traffic System (ATS)
- NJ Wanted Person
- NJ Motor Vehicle Commission and/or NLETS (Out of State Driver Records)
- CODY (Arrest Record System for Bergen County Law Enforcement).
- Local in-house computer check (CAD) – Bergenfield Police Dept.
- Local records check in city/municipality of residence

This release shall expire one year from the date of signing unless revoked sooner by the undersigned.

NAME: \_\_\_\_\_  
(Print)

DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
(Signature)

S.S. #: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Telephone #)

\_\_\_\_\_  
(Date)