

Email Address (APT)

Minimum Qualification Verification

Applicant: Please choose one of the following that best suits you starting with #1 and move down the list. Then attach your supporting documentation below. *

Upload Supporting Documents

PDF Only / Upload Supporting Documents for meeting minimum qualifications.

Upload Supporting Documents

PDF Only / Upload Supporting Documents for meeting minimum qualifications.

Upload Supporting Documents

PDF Only / Upload Supporting Documents for meeting minimum qualifications.

Provide Explanation for meeting minimum qualifications:



New Jersey State Police

AN EQUAL OPPORTUNITY EMPLOYER

Background Investigation Questionnaire

INSTRUCTIONS: Read through this entire questionnaire before completing the required information. Answer every question. **If a question with a red asterisk does not apply to you, write DNA in the space provided, otherwise you can leave any non-asterisk questions blank.** A candidate attempting to practice any deception or fraud in this questionnaire, in any examination, interview, or in securing eligibility for employment, or any misstatement of fact is reason for disqualification for employment and may be punished by law per N.J.S. 2C:28-2, 2C:28-3, and 2C:28-7. The questionnaire must be prepared by the applicant, with the exception of Reference Information. References will complete, date and sign their own required information for submission with this questionnaire.

NOTICE: Please be advised that this Background Investigation Questionnaire (BIQ) will remain a permanent part of your file with the New Jersey State Police. Your failure to thoroughly complete the required information will be reflected in a negative manner.

The Background Investigation Questionnaire (BIQ) and additional required documents listed in this questionnaire, shall be electronically uploaded and submitted to the Division of State Police by the BIQ submission deadline date.

Any required documents not able to be uploaded and submitted by the deadline date, must then be uploaded and submitted during the background phase once contacted by an investigator. College transcripts (Official or Unofficial) and credit reports may be sent uploaded directly to this BIQ as an attachment.

If you do not submit a fully completed questionnaire, your participation in the selection process may be terminated.

You are also required to promptly report any significant changes in your personal background information or involvement in any incident which might result in criminal or civil charges being brought against you while you are an applicant in the New Jersey State Police selection process. This includes but is not limited to:

- Changes in your address, employment, or marital status;
- Any police contact, motor vehicle crashes or summonses;
- Charges or convictions for any offense/crime; civil matters (bankruptcies, liens/judgements, etc.); or involvement in any incident which could lead to criminal or civil charges.

Failure to advise the Selection Process Unit by email at selectionprocessunit@njsp.gov of any of this information could adversely affect your status in the selection process.

WITHDRAWALS: Any concerns or requests an applicant may have regarding withdrawing from any phase of this selection process must be directed to the Selection Process Unit by email at selectionprocessunit@njsp.gov. An online withdrawal form will be completed at that time. If a withdrawal is requested prior to completing the background investigation questionnaire, click the box below, complete the withdrawal form, and submit.

PLEASE BE ADVISED: It is recommended to print or save the Background Investigation Questionnaire once you complete it before submission. No copies or information will be provided for future documents or if you reapply.

[Click here to withdrawal from the selection process.](#)

Not Checked

OFFICE USE ONLY: Do Not Check this Box (DR)

Not Checked

TIPS:

- **Save frequently to prevent loss of data.**
- **To access your saved form, use the link in the original email received with subject of "Action Required - Background Investigation Questionnaire".**
- **Once completed, you will click Submit. If any required fields are not filled, you will be directed to them to complete. You must click Submit after completing required fields.**

Applicant No.

What year did you previously apply? *

First Name *

Middle Name

Last Name *
Include Maiden Name

Address *

Address Line 2

City or Town *

State *
If none listed, choose Other.

Zip Code *

County *

Home Phone Number
Allows US and International Phone
Numbers

Cell Phone Number (Or Main
Contact Number) *
Allows US and International Phone
Numbers

Work Phone Number
Allows US and International Phone
Numbers

E-Mail Address *
No college or university emails (Ex. Use @gmail.com, @yahoo.com, etc.)

Click Here if Current Residence is Different from Above to Complete Additional Information
Not Checked

The NJSP Release Authorization Form must be completed and uploaded below.

For a copy of the form to download and print, please click [NJSP Release Authorization Form - BIQ](#).

Release form must be notarized by a licensed notary.

Instructions:

1. Print the New Jersey State Policy Release Authorization Form and leave it unfilled.
2. Take the form to a licensed Notary Public near you.
3. While in front of the Notary Public, enter your name on the line in the first paragraph and complete the items on the bottom left: Signature, Date, Date of Birth, and Social Security Number.
4. Have the Notary Public complete the items under Certificate of Acknowledgement.
5. Scan the notarized release into your device or computer and save as PDF and rename the PDF with Your Name followed by "_Release Authorization"
6. Press the "Select Files" button under the Upload Release Form* Section of the Front Page tab and upload your PDF.

Upload Release Form *

PDF Only / Document File Name should be same as field name prior to uploading

A. Personal Data & Citizenship Information - Enter 'DNA' for fields in which Do Not Apply.

1. Attach Photo Here *

PDF Only / Document File Name should be same as field name prior to uploading

The photo attached to this questionnaire will be used solely by investigative personnel in the course of their duties to accurately identify the applicant when verifying the accuracy of the information contained in this Background Investigation Questionnaire. **NOTE: The picture should only include the applicant. The picture must fit within the space provided, such as a passport photo.**

2. Personal Information

First Name *

Middle Name

Last Name *

List and explain any other names you have used, or have been known by, including nicknames:

3. Birth Information

Place of Birth City/Town *

Place of Birth State *
If none listed, choose Other.

Place of Birth County/Country *

Place of Birth Zip Code *

Birth Certificate Certificate
Number *

Birth Certificate City *

Birth Certificate State *
If none listed, choose Other.

Birth Certificate County *

Birth Certificate Zip Code *

Date of Birth *

Age *

4. Identification Information

Height (Inches) *

Weight (Lbs) *

Natural Eye Color *

Natural Hair Color *

List ALL scars, tattoos, body art, brands, and/or marks *

Provide location, detailed description, origin & significance/meaning for each.

Pursuant to Federal Privacy Act of 1974, (5 U.S.C. Section 552a (b)), you are hereby notified that disclosure of your social security number is mandatory. Disclosure of the social security number is required under N.J.S.A. 53:9. It may be used for the following purposes: (1) to verify your identify; (2) to aid in the processing of your application; (3) to aid in the completion of a criminal history background check; and (4) to aid in the collection of financial obligations. The provision of your social security number demonstrates your consent to its use for any of teh purposes set forth above.

5. Social Security Number *

6. Police Applications

Have you ever previously taken a written examination for employment as a state trooper with the New Jersey State Police? *

Have you ever previously submitted information for a background investigation to the New Jersey State Police for any public employment? *

7. Are you a citizen of the United States? *

8. Have you ever renounced your United States citizenship? *

9. Are you now or have you ever been a citizen of another country? *

10. Do you possess a Visa for any country? *

11. Can you read, write, and/or understand any language(s) other than English? *

12. List all the counties in which you are registered to vote. Enter 'DNA' for fields in which Do Not Apply.

Click this box if not applicable

Not Checked

County *	State *	Year *
	If none listed, choose Other.	

13. List any and all email, website, Facebook, Twitter, Snapchat, Instagram, and other social media venues you are affiliated with. List affiliate account/contact information. (ex. Facebook - username, Twitter-username) Enter 'DNA' for fields in which Do Not Apply.

List all email addresses: *

List all social media accounts and screen names: *

Are you affiliated with any other websites? *

All applicants must provide COPIES of the below-listed documents, along with this completed Background Investigation Questionnaire. Check the "Enclosed" box only if the document is provided with this completed Questionnaire. *(Check pending if you **have not obtained the required document.**)* Check the "Not Applicable" box if this document does not apply to you. These documents and the completed Background Investigation Questionnaire (BIQ) shall be submitted to the Division of State Police by the BIQ submission deadline date.

FBI Certification of ID *

Download FBI Certification of ID form [HERE](#).

Birth Certificate *

Naturalization Papers *

Social Security Card *

B. Social Status - [Enter 'DNA' for fields in which Do Not Apply.](#)

1. Current Status, Are you: *

2. Are you the biological, adoptive, foster parent, stepparent or legal guardian of any children (whether children are alive or deceased)? *

3. Have you ever been involved as a plaintiff or defendant in a paternity proceeding? *

4. List all family information: Father, mother, father-in-law, mother-in-law, current and past stepparents, sisters/brothers, step brothers/sisters, half-brothers and half-sisters names: If deceased, state in answer. [Enter 'DNA' for fields in which Do Not Apply.](#)

Full Name (First and Last) *

Relation *

Date of Birth *

Full Address with Zip Code *

Primary Phone Number *

If Deceased, enter 000-000-0000

Occupation *

Name of Business or Employer *

Work Phone Number

5. List full names (first, middle, last - include maiden name) of three friends and/or associates other than references (listed on tab L. References); employers, past or present; or dating relationship/partner. [Enter 'DNA' for fields in which Do Not Apply.](#)

Friend 1 - [Enter 'DNA' for fields in which Do Not Apply.](#)

Full Name (First, Middle, Last) *

Relation *

Date of Birth *

Full Address with Zip Code *

Primary Phone Number *

Occupation *

Name of Business or Employer *

Work Phone Number

Friend 2 - [Enter 'DNA' for fields in which Do Not Apply.](#)

Full Name (First, Middle, Last) *

Relation *

Date of Birth *

Full Address with Zip Code *

Primary Phone Number *

Occupation *

Name of Business or Employer *

Work Phone Number

Friend 3 - [Enter 'DNA' for fields in which Do Not Apply.](#)

Full Name (First, Middle, Last) *

Relation *

Date of Birth *

Full Address with Zip Code *

Primary Phone Number *

Occupation *

Name of Business or Employer *

Work Phone Number

6. Do you have major achievements or awards? *

7. Have you volunteered for any organization since the age of 18? *

8. Do you have leadership experiences? *

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Marriage/Divorce records,
Marriage, Civil Union or Divorce
Records *

C. Residence - Enter 'DNA' for fields in which Do Not Apply.

1. Where do you now reside? Enter 'DNA' for fields in which Do Not Apply.

From *

To (Present) *
Present

Address (Select as Populates) *

Apt No

Floor No

Phone Number (Cell) *

Phone Number (Home)

1a. Do you live with anyone/roommate(s)? *
Non Family Members Only

1b. Do you have a landlord? *

2. Do you have any ownership interest (either full, partial or joint) in this residence or any other real property? *

3. In chronological order, starting with the most recent past residence, state each and every previous residence since birth (include college residence, summer homes, military residence, etc.) If you resided with someone other than your spouse, civil union partner, parents or siblings, (including college or other roommates) list complete information below.

Past Residences - **MOST RECENT ON TOP**

Enter 'DNA' for fields in which Do Not Apply.

From *	To * Enter "Present" if current	
Full Address *		
Apt Number	County *	
Landlord/Housing Administrator *	Landlord Primary Email or Phone Number *	Full Name (Maiden) of Person Resided With (First and Last)/Roommate *
Relationship *	Date of Birth	Occupation *
Employer *		
Employer Address *		
Work Phone Number	Extension	

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Rental/Leasing Agreements *
Apartment or Housing / Only current rental or lease agreements

D. Education and Intern Study Programs - Enter 'DNA' for fields in which Do Not Apply.

If you have not done so already, immediately order official transcripts from all colleges/universities attended and have them sent directly to you. You may upload any unofficial/official transcripts to this questionnaire

now if you have them. You **MUST** provide your background investigator the Official transcripts once you receive them.

Proper fee must be forwarded to the college by the applicant.

1. List all colleges attended below.

List chronologically (most recent dates first) all post secondary schools attended, including trade schools and colleges/universities. Enter 'DNA' for fields in which Do Not Apply.

How many colleges have you attended? *

Degree *

2. Have you participated in a College or State Police Internship? *

3. Were you ever or are you a member of any social, fraternal, charitable, educational or nonprofit organizations (include collegiate team, club, and college fraternity/sorority organizations)? *

4. List chronologically (most recent dates first) all schools attended, grades 9 through 12. Enter 'DNA' for fields in which Do Not Apply.

Number of Schools *

5. Have you had any suspensions or disciplinary action? *

Suspensions and expulsions only. Do NOT include detentions.

6. Do you have any other formal schooling, specialized training, professional licenses/permits, etc. to report? *

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Professional Licenses and
Certificates *

College Transcripts *

Unofficial/Official Transcripts

Transcripts

Name of College *

College Transcript Requested on *

E. Selective Service and Military Service - [Enter 'DNA' for fields in which Do Not Apply.](#)

Download Military Records Fax Form [HERE](#).

If you are submitting this form through the military website you must copy the State Police information from question #4 and enter it verbatim on the electronic version you are submitting.

Date you faxed your "Request for Military Records" to (314) 801-9195 *

NOTE: ALL Applicants must "request" regardless of previous military experience or service in order to show that they have no record.

1. Have you ever served in an active military organization of the United States? *

2. Are you now or were you ever an active or inactive member of the Reserve Forces (any branch) of the United States or the National Guard of any state or any foreign government? *

3. Have you ever served in a military organization of any foreign government? *

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Military Separation Forms (DD-214) *

Honorable Discharge Certificate *

Veterans Preference Forms *

F. Employment - Enter 'DNA' for fields in which Do Not Apply.

1. List all present employer(s) first, including part-time and self-employment. Then CHRONOLOGICALLY list all previous employment, **beginning with the most recent past employment back to the age of 18.** OMIT NONE. If applicable, include dates of military service, school (not working), part-time and summer employment, and unemployment. For example 09/01/97 to 06/01/98 Unemployed - Attending College.

Present and Past Employers - Enter 'DNA' for fields in which Do Not Apply.

Check box if you were never employed
Not Checked

From *

To *

Enter "Present" if still current.

Employer Name *

Complete Address *

Immediate Supervisor *

Phone Number *

If unknown, provide Employer Phone Number. Allows US and International Phone Numbers

Extension

Occupation *

Reason for Leaving *

2. Are you now or have you ever engaged in any business as an owner (active or silent), partner, or corporate member? *

3. Were you ever subjected to disciplinary action in connection with any employment? *

4. Were you ever terminated or asked to resign from employment (this does not include being laid off)? *

5. Were you ever or are you a member of any employment related social, labor or fraternal organization? *

6. Unemployment Insurance or Other Federal, State, or Local Benefits Assistance - Enter 'DNA' for fields in which Do Not Apply.

Have you ever applied for and received unemployment insurance or other federal, state, or local benefits or assistance? *

7. Have you ever received, applied for, or filed a claim for any compensation, disability award, insurance allowance or any other assistance or benefit as a result of any employment? *

8. Have you submitted applications to other law enforcement agencies? *

9. Have you ever taken a polygraph examination? *

10. Have you ever attended a police academy? *

11. Have you ever possessed or do you possess any pistol permits, permits to purchase a handgun, firearm permits, firearm ID cards, or firearm dealer licenses, in this or any other state or area under federal jurisdiction? *

12. Do you own or possess firearms? *

13. Has your police license ever been suspended, revoked, or terminated? *

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Firearms Purchaser Identification
Card(s) *

Permits to Purchase Handgun *

Permits to Carry Handgun *

Police Training Certificate / License
*

Most Recent Pay Stub (3 Months) *

G. Financial - Enter 'DNA' for fields in which Do Not Apply.

1. Credit Card(s) - Enter 'DNA' for fields in which Do Not Apply.

Does not have a credit card.
Not Checked

Type of Credit Card *

Name of Institution *

Account No. *

Address *

Original Amount (Credit Limit) *

Present Balance *

Monthly Payments *

Amount of Arrears *

2. List current obligations per month. Enter 'DNA' for fields in which Do Not Apply.

Rent/Mortgage *

Enter \$0 if not applicable.

Car Payment *

Enter \$0 if not applicable.

Phone Bill *

Enter \$0 if not applicable.

Utilities (Cumulative Sum of All Household Utilities) *

Enter \$0 if not applicable.

Credit Cards (Total from Above - Monthly) *

Enter \$0 if not applicable.

Child Support *

Enter \$0 if not applicable.

Insurance: Home *

Enter \$0 if not applicable.

Insurance: Car *

Enter \$0 if not applicable.

Student Loans *

Enter \$0 if not applicable.

Other Loans *

Enter \$0 if not applicable.

Identify Loans *

Enter 'DNA' if not applicable

Total Monthly Obligations *

Add up Monthly Obligations and input Total

3. Other Loan/Payment Obligations - Enter 'DNA' for fields in which Do Not Apply.

Please note that Other Loan/Payments Obligations below are not calculated in 'Total Monthly Obligations'.

Other Loan/Payment Obligations *

Enter \$0 if not applicable.

Identify Other Loan/Payment Obligation *

Enter 'DNA' if not applicable

4. Do you have any debt not listed above? *

5. Other than standard withholding deductions, has any part of your wages ever been withheld and paid to another party to satisfy a debt, obligation or for any other purpose? *

6. Do you have a lien or judgement pending against you currently? *

7. Have you ever had a lien or judgment against you? *

8. Are you a co-signer on an outstanding loan? *

9. Have you ever been bonded? *

10. Refused a bond? *

11. Have you ever petitioned for bankruptcy? *

12. Do you have any assets? *

Example: stocks, bonds, checking, savings, money market accounts, pension funds, all bank certificates, i.e. certificates of deposit, etc., all investments, real estate property, credit unions and any disability compensation, benefits, allowance, life insurance, or monetary awards.

13. Have you filed all required federal and state personal income tax returns, including amended returns, for the previous three years? *

14. Have you accurately reported all of your taxable income, deductions, including but not limited to, tips, gratuities, cash or under-the-table earnings, on each of your own tax returns filed with the state and federal government? *

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Financial Statements *

Load all pages of all financial statements.

Credit Report *

ALL Loans *

Mortgages, auto loans, student loans, boat, motorcycle, etc.

Federal and State Tax Returns *

Include both state and federal W-2 Forms for last 3 years (6 total).
Include all 1099 forms and Schedules.

H. General and Other Affiliations

1. Have you ever been the subject of an allegation or investigation pertaining to a person's race, ethnic origin, religious group, gender, sexual orientation, or any protected category as set forth in www.state.nj.us/csc/about/division/eeo/laws.html? *
2. Have you ever subjected or been alleged to have subjected others to harassment, discrimination or a hostile work environment? *
3. Have you ever been involved in a personal relationship where you threatened, assaulted or harassed another party or had a domestic violence complaint, temporary restraining order or final restraining order entered against you? *
4. Have you ever been involved in a personal relationship in which you were threatened, assaulted, or harassed, or where you sought a domestic violence complaint, temporary restraining order or final restraining order against another person? *
5. Have you ever been charged with, or accused of violating the civil rights of another person? *
6. Have you ever been involved in a civil court action in this state or elsewhere? *
7. Are you now, or have you ever been, a member or an affiliate of any organization, association, movement, or group which you know to advocate the commission of acts of force or violence designed to overthrow the government of the United States or this State? *

8. Are you now, or have you ever been, a member of any organization, association, movement, or group which you know to advocate the commission of acts of force or violence designed to deny others their rights under the Constitution of either the United States or the State of New Jersey? *

9. Are you now, or have you ever been, a member of a gang? *

All applicants must provide COPIES of the below-listed documents, along with this completed Background Investigation Questionnaire. Check the "Enclosed" box only if the document is provided with this completed Questionnaire. (*Check pending if you **have not obtained the required document.***) Check the "Not Applicable" box if this document does not apply to you. These documents and the completed Background Investigation Questionnaire (BIQ) shall be submitted to the Division of State Police by the BIQ submission deadline date.

ALL Court Documents Pertaining
to above questions (Criminal, Civil,
Family) *

I. Arrests, Summonses, Etc. - [Enter 'DNA' for fields in which Do Not Apply.](#)

NOTICE: Expungements, PTI, and conditional discharges must be disclosed on this application. Such disclosure is for law enforcement purposes.

1. As a juvenile, have you ever had any police contact, been taken into custody, received a summons, complaint(s) or been charged with Juvenile Delinquency? *

2. Have you ever been summoned, subpoenaed, interviewed, or required to testify before any municipal, county, state, or federal agency or other investigative body as a subject, victim, or witness for a criminal or civil matter? *

3. Since the age of 18 years old, have you ever had any police contact, received a summons complaint, been arrested, indicted, or convicted for any violation of the law including fish and game laws? Include disorderly persons offenses, petty disorderly persons offenses, and city, borough or county ordinances/violations or any legal action in any jurisdiction (DO NOT LIST MOTOR VEHICLE VIOLATIONS) *

4. Have you ever had a criminal record expunged, or been accepted into a Pre-Trial Intervention or Conditional Discharge Program? *

5. Have you ever been the subject, witness and/or victim of a criminal or civil investigation or been investigated or interviewed by any law enforcement or private security agency, including the Division of State Police, for any reason (other than pre-employment for a police dept)? *

6. Have you ever been fingerprinted? (Exclude this application and applications for employment with other police departments, but include if fingerprinted for criminal or noncriminal purposes such as licensing or employment.) *

7. Have you ever committed a crime involving moral turpitude, without regard to whether charges resulted in a conviction? *

If you answered "yes" to any of the above questions, upload supporting documents here if applicable.

PDF Only

J. Motor Vehicle History - [Enter 'DNA' for fields in which Do Not Apply.](#)

1. Do you currently have a NJ Driver's License? *

2. Have you ever held or do you hold a driver's license in another state? *

3. Have you or a vehicle owned or leased by you ever been involved in any motor vehicle accident? *

4. Have you ever received a summons (ticket) for a violation of the Motor Vehicle Laws in this or any other state? (Exclude parking violations) *

5. Do you currently own or lease a vehicle?

6. Have your driving privileges ever been suspended or revoked in this or any other state or country? *

7. Have you ever been arrested for driving while under the influence of alcohol or drugs in this or any other state? *

8. Have you ever refused to submit to a drug or alcohol test requested during or after a motor vehicle stop, where testing was required under law or agency policy? *

9. Have you been convicted of two or more motor vehicle offenses for reckless driving pursuant to N.J.S.A. 39:4-96 or under the laws of another state, territory, country, or the United States? *

10. Do you now or have you ever possessed a chauffeur's or a commercial driver's license? *

11. Have you ever had your auto insurance discontinued for any reason? *

12. Have you ever received, applied for, or filed a claim for any compensation, disability award, insurance allowance, or any other assistance or benefit as a result of a motor vehicle accident? *

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Driver's License(s) *

Vehicle Registrations (all
owned/leased or vehicles used) *

Automobile Insurance Cards (all
owned/leased or vehicles used) *

ALL Motor Vehicle Accident
Reports *

K. Other Information

1. Have you ever illegally used or possessed marijuana/hashish? *

2. Have you ever used or possessed any other illegal drug? *
3. Have you ever used any prescription medication not prescribed or provided to you by a medical professional? *
4. Have you ever used or possessed anabolic steroids, or any other performance enhancing substances, not prescribed to you by a medical professional? *
5. Have you ever used any other substance for the express purpose of attaining an altered state of mind? *
6. Have you ever sold, manufactured or distributed an illegal drug or prescription drug at any time in your life? *
7. If you answered yes to any of the 6 questions above, were you employed in a position of public trust (e.g. a sworn law enforcement officer, enlisted in the armed services, etc.) at the time you were engaged in the behavior? *
8. Have you ever solicited or engaged in sex acts in exchange for money, goods or favors? *
9. Have you ever viewed, possessed or distributed child pornography? *
10. Have you ever participated in a drug testing program and had a positive result? *
11. Are there any matters which may involve a conflict of interest or any problems in connection with your appointment to the position of Trooper of the New Jersey State Police which are not fully covered by your answers to this questionnaire? *
12. Is there any event, situation or circumstance in your past which, if it were public knowledge, might bring personal discredit to you or on the New Jersey State Police if you were appointed? *
13. Have you ever mishandled, destroyed, or fabricated evidence? *
14. Have you ever intentionally made any materially false statement(s) or omission(s) in obtaining a license to be a law enforcement officer? *

L. References

INSTRUCTIONS ARE AS FOLLOWS:

If you are unable to physically meet with your Reference:

- Scan and attach the reference form page provided to an email.
- Send reference form via email.
- DO NOT mail the form via the postal service or any other service carrier.

Advise each Reference to fill out the form completely, then sign and return same to you via email or physically handed to you.

All completed reference pages must be reattached to the BIQ when submitted.

Click [HERE](#) for blank Reference forms

Reference One *

PDF Only / Document File Name should be same as field name prior to uploading

Enter Full Name for Reference One *

Reference Two *

PDF Only / Document File Name should be same as field name prior to uploading

Enter Full Name for Reference Two *

Reference Three *

PDF Only / Document File Name should be same as field name prior to uploading

Enter Full Name for Reference Three *

Additional Explanation

M. Additional Documents

Miscellaneous Document Upload

N. Certification of Applicant

I will assist in any way to obtain any and all documents and information requested by the New Jersey State Police.

I certify that all of the statements made in this application are true, complete and correct to the best of my knowledge and belief, and are made in good faith. I am aware that any intentional misrepresentation of information supplied by me may result in my disqualification from the selection process. Further, I authorize the New Jersey State Police to verify any and all information contained herein and to review my employment, education, financial information, criminal history, military, disciplinary and other records, all social media online accounts and content, and information from any source as noted in the duly executed Authorization and Release Form.

I have read this Certification and I understand and agree to the conditions imposed herein.

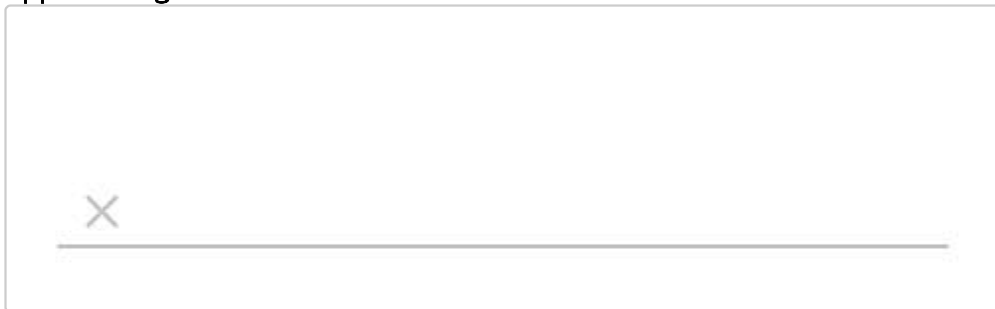
Not Checked

I agree to update NJSP Selection Process Unit on any changes or updates to the information in this BIQ.

Not Checked

Applicant Name (First and Last) *

Applicant Signature



Date *

03/18/2025