



# WASHINGTON TOWNSHIP POLICE DEPARTMENT



JEFFREY ALMER  
CHIEF

1 EAST SPRINGTOWN RD.  
LONG VALLEY, NEW JERSEY 07853

908-876-3232  
FAX 908-876-5655

To: Patrol Officer Applicant  
From: Chief Jeffrey Almer  
Date: June 7, 2019  
Re: Examination Process

## Application Process

Thank you for your interest in the Washington Township Police Department. In order to be eligible to meet our agencies criteria a candidate **MUST** meet the following minimum requirements. The Washington Township Municipal Code 27-6 mandates these requirements. There are no exceptions!

- 1) Be a citizen of the United States
- 2) Be between the ages of 18-35
- 3) Have a valid New Jersey Drivers License (Required prior to employment)
- 4) Be of good moral character
- 5) Have a minimum of either an Associate Degree from an accredited College or University, have earned at least 60 College credits from an accredited College or University or have completed three years' active military service concluding with an honorable discharge. **(All College requirements must be established by December 31, 2019)**

Please follow the application directions carefully; failure to do so will eliminate you from the process. The preliminary packet contains all the forms that you will need for the examination process.

Your two page application, digitally signed essential functions of a police officer's acknowledgement, digitally signed physical agility testing hold harmless agreement and application fee must be submitted via [PoliceApp.com](http://PoliceApp.com) by August 9, 2019. The application fee is \$100.00 no personal checks are accepted. **Applications will only be accepted via PoliceApp.com (DO NOT MAIL YOUR APPLICATION OR ANY OTHER DOCUMENTS)**

## Phase I. Written Examination

The New Jersey State Chiefs' of Police Association will administer and score the written examination. The examination will be held at the Morris County Police and Fire Fighter Academy, located at 500 West Hanover Ave. Parsippany, NJ. (Directions are available at [www.morrisacademy.org](http://www.morrisacademy.org)) The examination will be held on Saturday August 17, 2019 at 10:00AM. A minimum score of 80% must be obtained on the examination to advance to Phase II. Candidates will be informed via electronic mail from **Police.app.com** whether they have advanced and when to report for the physical agility examination. **(DO NOT CALL POLICE HEADQUARTERS FOR TEST RESULTS)**

1. No applicant will be admitted into the test after the examination commences. You are not entitled to a refund if you are late for the written examination. Applicants are required to bring two # 2 pencils to the written examination and photo identification.
2. There are no refunds of the application fee after the written examination date. The only refund exception will be if you contact Lt. Douglas Compton at [dcompton@wtpdmorris.org](mailto:dcompton@wtpdmorris.org) prior to August 9, 2019.



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3. If you fail to appear for the written examination you will be eliminated from the selection process.
4. Upon receiving notification that you passed Phase I, you must be prepared to schedule an appointment with your physician to have your medical waiver form signed before the physical agility examination.
5. If you have a disability that may interfere with you taking the written examination you must contact Lt. Douglas Compton prior to August 9, 2019 to determine if there is a reasonable accommodation.

## **Phase II. Physical Agility Examination**

Phase II of the selection process is a physical agility exam. The date, time and location will be announced via electronic mail from **Policeapp.com** at a later time to the candidates who have successfully completed Phase I. A detailed list of the exercises conducted is attached on the Physicians Release form. A minimum score of 80% is required to advance to Phase III. (All required forms are located in this packet)

Those applicants notified to respond to Phase II **MUST** bring:

- 1) **Physicians Release**, signed by a physician certifying that you are physically able to participate in the examination.
- 2) Photo Identification
- 3) Athletic attire and sneakers

***If you do not bring the requirement Physician Release, you will not be permitted to participate in the Physical Agility Test and you will be eliminated from the selection process. There will be no excused absences or re-testing.***

## **Phase III. Department Oral Interview**

Oral Interviews will be conducted at the Washington Twp. Police Department, located at 1 East Springtown Road, Long Valley, N.J. The candidate will also be provided with a question to answer in writing. The candidates who have successfully completed Phase II will be notified via electronic mail from **Policeapp.com** of the date and time of their interview. The candidates will then be ranked from the highest to lowest.

Based on the amount of openings, the Administrative staff will conduct a second interview on a separate day. Upon successful completion of Phase III, candidates will be sent for medical and psychological screenings.

The psychological phase, background investigation, and medical examination will be on a pass/fail basis. Candidates will be advised via telephone where and when to report for each these phases. The candidate will be provided with a very extensive background investigation application packet.

Good luck to each one of you, thank you for your interest in the Washington Twp. Police Department.

Sincerely,



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## APPLICATION FOR EMPLOYMENT

PLEASE PRINT OR TYPE ALL INFORMATION - USE BLACK INK

### EMPLOYMENT DESIRED

POSITION (CHECK ONE)  POLICE OFFICER  CIVILIAN  OTHER

### PERSONAL INFORMATION

NAME: \_\_\_\_\_ SOCIAL SECURITY NO: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)

PHONE NUMBER: \_\_\_\_\_ OTHER NAMES/ ALIASES: \_\_\_\_\_

PRESENT ADDRESS: \_\_\_\_\_  
STREET CITY STATE ZIP

### SPECIAL QUESTIONS

DO NOT ANSWER ANY OF THE QUESTIONS IN THIS FRAMED AREA UNLESS THE EMPLOYER HAS CHECKED A BOX PRECEDING A QUESTION. THEREBY INDICATING THAT THE INFORMATION IS REQUIRED FOR BONA FIDE OCCUPATIONAL QUALIFICATION, OR DICTATED BY NATIONAL SECURITY LAWS, OR NEEDED FOR OTHER LEGALLY PERMISSIBLE REASONS.

HEIGHT: \_\_\_\_\_ FEET \_\_\_\_\_ INCHES  WEIGHT: \_\_\_\_\_ LBS. \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_ - \_\_\_\_ - \_\_\_\_  PLACE OF BIRTH (City & State): \_\_\_\_\_

Driver's License Number: \_\_\_\_\_  State \_\_\_\_\_

Are you prevented from lawfully becoming employed in the U.S.?  Yes  No

Have you ever been convicted of a crime that has not been expunged or sealed?  Yes  No. If Yes, explain: \_\_\_\_\_

Have you ever been convicted of a Disorderly Persons Offense / Petty Disorderly Offense?  Yes  No. If Yes, explain: \_\_\_\_\_



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| EDUCATION                                   | NAME AND LOCATION OF SCHOOL | NO. OF YEARS ATTENDED | DID YOU GRADUATE?            | SUBJECTS STUDIED       |
|---|-----------------------------|-----------------------|------------------------------|------------------------|
| GRAMMER SCHOOL                              |                             |                       | <input type="checkbox"/> YES |                        |
|   |                             |                       | <input type="checkbox"/> NO  |                        |
| HIGH SCHOOL                                 |                             |                       | <input type="checkbox"/> YES |                        |
|   |                             |                       | <input type="checkbox"/> NO  |                        |
| COLLEGE                                     |                             |                       | <input type="checkbox"/> YES | (DEGREE OBTAINED)      |
|   |                             |                       | <input type="checkbox"/> NO  |                        |
| CORRESPONDENCE,<br>BUSINESS OR TRADE SCHOOL |                             |                       | <input type="checkbox"/> YES | (CERTIFICATE OBTAINED) |
|   |                             |                       | <input type="checkbox"/> NO  |                        |

ATTACHED COPY OF HIGH SCHOOL, COLLEGE AND TRADE SCHOOL DIPLOMAS, AS WELL AS YOUR COLLEGE TRANSCRIPT TO THIS APPLICATION

**FORMER EMPLOYERS** (LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH LAST ONE FIRST)

| DATE: (MONTH AND YEAR) | NAME AND ADDRESS OF EMPLOYER | POSITION HELD | REASON FOR LEAVING |
|------------------------|------------------------------|---------------|--------------------|
| FROM:                  |                              |               |                    |
| TO:                    |                              |               |                    |
| FROM:                  |                              |               |                    |
| TO:                    |                              |               |                    |
| FROM:                  |                              |               |                    |
| TO:                    |                              |               |                    |
| FROM:                  |                              |               |                    |
| TO:                    |                              |               |                    |



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**REFERENCES:** GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST 3 YEARS.

| <u>NAME</u> | <u>ADDRESS</u> | <u>TELEPHONE NUMBER</u> |
|-------------|----------------|-------------------------|
|             |                |                         |
|             |                |                         |
|             |                |                         |

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT ANY PERTINENT INFORMATION THAT THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU."

DATE:

\_\_\_\_\_

SIGNATURE:

\_\_\_\_\_

**WASHINGTON TOWNSHIP IS AN EQUAL OPPORTUNITY EMPLOYER.**



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## PATROL OFFICER ESSENTIAL FUNCTION ACKNOWLEDGMENT

Name. \_\_\_\_\_

                                Last           First    Middle

Date of birth \_\_\_\_\_ Social Security Number \_\_\_\_\_

Attached is a list of essential functions police officers in this agency are expected to perform on a routine basis. Please review the attached list carefully. If you have any questions concerning those essential functions listed on the attached sheets, or your ability to perform those functions please contact Lt. Douglas Compton (908) 876-3232.

If you believe that you are able to perform these essential functions and wish to be further considered for the position of patrol officer, please sign and date this form and return it to Lt. Douglas Compton. Retain the list of essential functions. If you successfully complete the physical agility test you will be required to pick up a detailed application and have it returned by the date specified. If you are selected past the oral phase you will be required to submit fingerprints, sign a waiver authorizing the release of necessary confidential information. The hiring process will also include a medical and psychological examination.

A drug test will be administered at least once during the hiring or training process. All members of this agency are subject to random drug testing throughout their employment. A positive test for illegal drugs will result in dismissal and will bar future law enforcement employment.

\_\_\_\_\_ Date \_\_\_\_\_  
Applicant's signature



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- Walk, sometimes for long periods of time, in extreme weather conditions, in physically hazardous conditions and locations.
- Run, sometimes sprinting at a high rate of speed for a short distance, in extreme weather conditions, in physically hazardous conditions and locations.
- Ascend or descend stairs.
- Climb over, pull up over, jump over obstacles.
- Jump down from elevated surfaces or areas.
- Climb or crawl through openings.
- Balance on uneven or narrow surfaces.
- Use body force to gain entrance or break through barriers.
- Push objects, vehicles, or persons.
- Pull objects or persons.
- Lift and carry objects or persons.
- Drag objects or persons.
- Sit or stand for extended periods of time.
- Employ defensive tactics, using balance, leverage, concentration of power and opponent's energy.
- Swim.
- Operate a motor vehicle, during the day or night, in emergency situations, at high rates of speed, on the open road or in congested traffic, in unsafe conditions caused by factors such as fog, smoke, rain, ice, or snow.
- Posses a valid and current New Jersey drivers license
- Detain individuals.
- Stop suspicious vehicles and or individuals.
- Pursue fleeing suspects, in a vehicle or on foot.
- Disarm people.
- Restrain or subdue resisting suspects.
- Effectuate a full physical custody arrest, forcibly if necessary, using hand cuffs and other restraints.
- Conduct visual and audio surveillance.
- Perform law enforcement patrol functions, on foot or in a vehicle.
- Issue summonses.
- Direct traffic, sometimes for long periods of time, using hand signals, whistle, flares, barricades, etc.
- Observe, record, recall and report incidents and information.
- Operate radar equipment.
- Administer field sobriety tests.
- Operate computer equipment.
- Operate a fire extinguisher.
- Fingerprint, photograph and video tape individuals, objects and scenes.
- Transport citizens, prisoners, and committed mental patients, using handcuffs and other restraints, when appropriate.
- Work rotating shifts and adapt to irregular working conditions. Work on holidays and weekends.
- Maintain mental alertness and readiness to act, even during long periods of calm and inactivity.
- Identify, collect, label and preserve evidence.
- Secure the scene of a crime, emergency or disaster.
- Stand guard at the scene of a crime, emergency or disaster to prevent damage, loss or injury.



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- Control crowds.
- Secure and evacuate persons from particular areas, using either verbal commands or the appropriate degree of physical force.
- Administer emergency first aid.
- Physically check buildings, including doors and windows, to insure that they are secure.
- Mediate hazardous conditions by direct action or notification of appropriate authority or agency.
- Perform searches for people in buildings, vehicles, and large outdoor areas, which may involve seeing, feeling, and detecting minute objects, and walking for long periods of time.
- Search for missing, wanted, or lost persons and evidence.
- Legally possess, carry and retain control of a firearm.
- Load, unload, aim, and fire a handgun and shotgun in day or night conditions from a variety of body positions at the proficiency level equal to or higher than the minimum qualifications standard issued by the Attorney General.
- Process arrested persons, which includes examining documents, communicating verbally, and eliciting and recording information.
- Understand and follow orders, policies, directives, and procedure.
- Accept direction and function cooperatively as one member of a unit.
- Communicate effectively verbally and in writing, detailing incidents and activities of those involved.
- Prepare written investigative and other reports, including sketches, using appropriate grammar, symbols and mathematical computations.
- Read and comprehend legal and non-legal documents, including the preparation and processing of documents such as summonses, affidavits and warrants.
- Communicate effectively and coherently over telephone, walkie-talkie or radio, initiating or responding to verbal communications.
- Communicate effectively in court and other formal settings.
- Communicate effectively with people, including juveniles, by giving information and direction, by eliciting information and by advising of rights, processes, and procedure.
- Integrate individual activities and goals with the efforts of other members of the agency for the promotion of common goals and objectives.
- Mediate disputes and confrontations with hostile and potentially violent individuals.
- Gather information by observation of behavior, visual inspection and oral communication: determine what information is significant; assess a situation based on that information, and exercise independent judgment to make timely decisions concerning choice of action and equipment.
- Perform a variety of tasks involving different and sometimes contrasting skills in rapid succession during short periods of time and while under considerable emotional and or physical stress.
- Exercise independent judgment in determining when there is reasonable suspicion to detain, when probable cause exists to search and or arrest, and when force may be used and to what degree.
- Endure verbal, mental, and physical abuse, including threats, taunts and insults to self, family and fellow officers.
- Withstand exposure to and deal appropriately with stress involved in dealing with hostile views, opinions and behavior in antagonistic settings; with crime victims, accident victims, disaster victims, and their families; with incidents of suicide, domestic violence, and homicide.

*This is a comprehensive but not exhaustive list of the essential functions of a  
Washington Township Patrol Officer.*





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## PHYSICAL AGILITY TESTING HOLD HARMLESS AGREEMENT

The physical testing that you are about to undergo will involve nine major segments of physical fitness and exercise

1. PUSH-UP 30 seconds
2. SIT-UPS 30 seconds
3. SQUAT THRUSTS 30 seconds
4. STANDING BROAD JUMP
5. HORIZONTAL LADDER 30 seconds
6. VERTICAL WALL CLIMB Timed
7. PULL UPS no time limit
8. AGILITY RUN timed event
9. 1.5 MILE RUN timed event

All nine events are job related, non-discriminatory and designed to show how a candidate would perform in a situation related to law enforcement. There have been few, if any, complications for those participating in the testing program. If a candidate is not tolerating the stress of one of the segments, then the activity will be stopped. Risk of injury is possible in all physical activity, but is minimal and rare. Any injuries which do occur, **MUST** be reported to one of the test proctors immediately.

I (print your name) \_\_\_\_\_, in signing this form, state that I understand the description of the program and its possible implications. Further, I agree for myself, my heirs, dependents and personal representative not to assert any claim of suit for money damages against the Township of Washington, the Washington Township Police Department, and its officers, the County of Morris, the Morris County Firefighter and Police Training Academy, and its officers and employees, for pain and suffering, medical expenses, loss of wages, injuries, permanent disability or pecuniary losses by reason of any injuries or losses I or my heirs or my dependents may sustain during or as a result of my participation in activities conducted by the Washington Township Police Department at the Morris County Firefighter and Police Training Academy.

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Candidates Signature

Date



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## PHYSICIANS RELEASE FORM

Candidate's Name (Last, First, MI) \_\_\_\_\_

Candidate's Address: \_\_\_\_\_

Candidate's Date of Birth: \_\_\_\_\_

Candidate's Social Security Number \_\_\_\_\_

Candidate's Signature: \_\_\_\_\_

The above named candidate will participate in a physical agility test as outlined below.

Kindly examine the candidate to determine his/her fitness for participation in this physical agility test:

- |                        |                        |
|------------------------|------------------------|
| 1. PUSH UPS            | 7. VERTICAL WALL CLIMB |
| 2. SIT-UPS             | 8. PULL UPS            |
| 3. SQUAT THRUSTS       | 9. AGILITY RUN         |
| 4. STANDING BROAD JUMP | 10. 1.5 MILE RUN       |
| 5. HORIZONTAL LADDER   |                        |
| 6. VERTICAL WALL CLIMB |                        |

The candidate is required to perform their maximum amount of exercises in the given time period. The candidate will have no rest period between events 1 through 5. Based upon the medical examination, the above named candidate is determined to be: (Please check the appropriate space)

\_\_\_\_\_ Medically fit to participate in the physical agility test.

\_\_\_\_\_ NOT Medically fit to participate in the physical agility test.

Physician's Name: \_\_\_\_\_

Physician's Address: \_\_\_\_\_

\_\_\_\_\_  
Physician's Signature and License Number

\_\_\_\_\_  
Date