



**SECTION XIII. AGENCY APPLICATIONS**

165. Have you ever previously taken a written examination for employment as a Police Officer with New Jersey Transit Police Department? Yes:  No:  if yes, list month and year of each Occasion: \_\_\_\_\_

166. Have you ever previously submitted information for a background investigation to the New Jersey Transit Police department for any public employment? Yes:  No:  if yes, list month and year of each occasion: \_\_\_\_\_

167. Did you yourself take the NJDOP Law Enforcement exam? Yes:  No:  If yes, provide dates and the corresponding score you received for each exam: \_\_\_\_\_

168. Other than NJDOP Law Enforcement exam, have you ever applied to any other law enforcement? agency (city, county, state or federal)? Yes:  No:  If yes, you must list EVERY agency you have ever applied to starting with the most recent and supply the following information for each agency:

NAME OF AGENCY	DATE APPLIED	POSITION APPLIED FOR
AGENCY'S CITY OR TOWN	COUNTY	STATE
AGENCY CONTACT OR INVESTIGATOR	PHONE NO. AND EXT.	ZIP CODE
<b>CHECK EACH STEP IN THE PROCESS WHICH YOU HAVE COMPLETED:</b>		
RESUME <input type="checkbox"/>	APPLICATION <input type="checkbox"/>	WRITTEN <input type="checkbox"/>
BACKGROUND <input type="checkbox"/>	CHIEF ORAL INTERVIEW <input type="checkbox"/>	PHYSICAL AGILITY <input type="checkbox"/>
ORAL INTERVIEW <input type="checkbox"/>		
DID YOU FAIL ANY PORTION OF THEIR PROCESS? Yes: <input type="checkbox"/> No: <input type="checkbox"/>		
IF YES, WHICH PORTION AND EXPLANATION:		
STATUS:		
CONDITIONAL JOB OFFER <input type="checkbox"/>	HIRED <input type="checkbox"/>	ON LIST <input type="checkbox"/>
WITHDRAWN <input type="checkbox"/>	DISQUALIFIED <input type="checkbox"/>	
DOCUMENTATION RECEIVED FROM AGENCY? Yes: <input type="checkbox"/> No: <input type="checkbox"/>		
IF YES, PROVIDE COPIES		

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BACKGROUND <input type="checkbox"/>	CHIEF ORAL INTERVIEW <input type="checkbox"/>	PHYSICAL AGILITY <input type="checkbox"/>
ORAL INTERVIEW <input type="checkbox"/>		
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CONDITIONAL JOB OFFER <input type="checkbox"/>	HIRED <input type="checkbox"/>	ON LIST <input type="checkbox"/>
WITHDRAWN <input type="checkbox"/>	DISQUALIFIED <input type="checkbox"/>	
DOCUMENTATION RECEIVED FROM AGENCY? Yes: <input type="checkbox"/> No: <input type="checkbox"/>		
IF YES, PROVIDE COPIES		

Additional Information: Yes:  No:  See Continuation Page# \_\_\_\_\_

INITIALS \_\_\_\_\_

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Additional Information: Yes:  No:  See Continuation Page# \_\_\_\_\_

INITIALS \_\_\_\_\_

**SECTION XIII. Question 168 continuations:**

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