



DEPARTMENT OF POLICE EGG HARBOR TOWNSHIP

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STUDENT INTERNSHIP APPLICATION

LAST NAME		FIRST NAME		MIDDLE NAME	
HOME ADDRESS					
SCHOOL ADDRESS					
HOME PHONE		SCHOOL PHONE		CELL PHONE	
HOME EMAIL		SCHOOL EMAIL		WORK PHONE	
HOME EMAIL		SCHOOL EMAIL		WORK EMAIL	
HOME EMAIL		SCHOOL EMAIL		OTHER EMAIL	
COLLEGE/UNIVERSITY				CURRENT GPA	
AGE		SEX		HEIGHT	
AGE		SEX		WEIGHT	
EYE COLOR		DATE OF BIRTH		PLACE OF BIRTH	
DRIVERS LICENSE #				STATE OF ISSUE	
1) Have you ever been arrested or charged for any offense (including juvenile or municipal ordinance violations)? If you answered "yes", explain your answer on the back of this page					
2) Have you ever been convicted for any offense, other than traffic? If you answered "yes", explain your answer on the back of this page					
3) Is your license now, or has it ever been, suspended or revoked? If you answered "yes", explain your answer on the back of this page					
4) Have you ever been named in a temporary or final restraining order? If you answered "yes", explain your answer on the back of this page					

Please email submitted applications to internships@ehtpd.com