



**COUNTY OF BERGEN**  
 DEPARTMENT OF PUBLIC SAFETY  
**BERGEN COUNTY POLICE ACADEMY**  
 281 Campgaw Road · Mahwah, N.J. 07430  
 (201)785-5700 · FAX (201)785-6036

**James J. Tedesco III**  
*County Executive*

**John E. Booth**  
*Director of Police Academy*

**Captain Ryan King**  
*Officer in Charge, Police Academy*  
*Bergen County Sheriff's Office*

**BASIC COURSE for POLICE OFFICERS TRAINING APPLICATION**

<b>Last Name</b>	<b>First Name</b>	<b>Background Date</b>	<b>Medical Date</b>	<b>Psych Eval. Date</b>	<b>Drug Test Result date</b>
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

IT IS UNDERSTOOD THAT ANY AND ALL RESPONSIBILITY FOR PERSONAL INJURY TO ANY MEMBER OF THE APPLYING DEPARTMENT SHALL REST UPON THE SENDING AGENCY IN WHICH THE MEMBER(S) PERFORM THEIR DUTIES.

CERTIFICATION: I HEREBY CERTIFY THAT ALL PERSONNEL FROM THIS DEPARTMENT, WHO ARE ENROLLED IN THE ABOVE COURSE, ARE COVERED BY WORKMAN'S COMPENSATION AND LIABILITY INSURANCE OR ARE OTHERWISE ADEQUATELY INSURED. I ALSO CERTIFY THAT A BACKGROUND CHECK, MEDICAL EXAM WITH STRESS TEST, PSYCHOLOGICAL EXAM AND DRUG TEST HAVE BEEN COMPLETED AND THE RESULTS HAVE BEEN RECEIVED.

\_\_\_\_\_  
 CHIEF OR DEPT. HEAD'S SIGNATURE Date

So that we may keep our records current, please fill in the following:

PLEASE PRINT ALL INFORMATION:

Chief's Name: \_\_\_\_\_

Department Name: \_\_\_\_\_

Department Phone Number \_\_\_\_\_ Fax \_\_\_\_\_

PLEASE EMAIL THIS APPLICATION TO [RecruitTraining@BergenCountyNJ.gov](mailto:RecruitTraining@BergenCountyNJ.gov)