

**If you are interested in becoming an intern with the Paterson Police Department please complete the following steps:**

- Complete the Internship Program application (first two pages)
- Attach an updated copy of your resume
- Attach documentation from your school stating the hours required to complete your internship and your counselor or professor's contact information.
- Contact Off. Velez (when your application is completed) to schedule notarizing the last two pages and getting finger prints at (973)321-1143.

# Paterson Police Department

## Internship Program

Applicant Information			
Last Name		First	Date
Street Address			Apt/Unit
City	State	Zip	
Phone	Cell Phone		
Email address:			
Have you ever been convicted of a felony?		If yes please explain:	
<input type="checkbox"/> Yes <input type="checkbox"/> No			
How did you hear about our internship program?			

Availability							
Please check semesters of availability:							
<input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer <input type="checkbox"/> Other, please explain: _____							
Please check your general availability	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning (approx. 9-1)							
Afternoon (approx. 1-5)							
Evening (approx. 5-9)							

Areas of Interest		
Please indicate which area interests you:		
<input type="checkbox"/> Administration	<input type="checkbox"/> Major Crimes	<input type="checkbox"/> Technology
<input type="checkbox"/> Patrol	<input type="checkbox"/> Crime Scene	<input type="checkbox"/> Training
<input type="checkbox"/> Juvenile Div.	<input type="checkbox"/> Other, please explain: _____	

Experience/Education and Skills	
Current employment status: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Not Employed	
Current or most recent paid position held	
Are you currently a full-time student?	If yes, please indicate school and concentration:
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Level	Areas of study:
<input type="checkbox"/> Freshmen <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Graduate student	

Do you speak any other languages? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please list language <input type="checkbox"/> Fluent <input type="checkbox"/> Semi-Fluent <input type="checkbox"/> Basic
Computer Skills/Software Used:	

<b>Personal Information</b>
Why are you interested in an internship in our organization?
What specific experience would you like to gain through this internship?
Describe your long-term career goals:

<b>Professional References</b>	
Name	Relationship and contact info (e-mail and/or phone number)

<b>Disclaimer and Signature</b>	
I certify that my answers are true and complete to the best of my knowledge. If this application leads to an internship assignment, I understand that false or misleading information in my application may result in my release.	
I further certify that I received in-service training on Sexual Harassment and Blood borne Pathogen.	
Signature:	Date:

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**RELEASE, WAIVER AND HOLD HARMLESS AGREEMENT**

THIS RELEASE, WAIVER AND HOLD HARMLESS AGREEMENT is given to the City of Paterson, a municipal corporation of the State of New Jersey, having its offices located at City Hall located at 155 Market Street, Paterson, New Jersey 07505, (hereinafter referred to as the "City"), by \_\_\_\_\_ (hereinafter student) having its residence located at \_\_\_\_\_.

WHEREAS, the student has requested permission to accompany, \_\_\_\_\_ of the Paterson Police Department, while on duty for the purpose of \_\_\_\_\_.

WHEREAS, this activity may pose a danger, serious personal injury, or property damage to the student; and

WHEREAS, the student acknowledges and accept all such risks, even if caused by the negligence of the City personnel; and

WHEREAS, the City will not consent to this request unless and until the student have acknowledged and accepted these serious risks.

NOW, THEREFORE, the student, hereby agree to waive all claims, release all claims, and hold harmless the City of Paterson, its servants, agents, officers and employees from any and all liability claims, suits or actions at law or in equity and all judgments and demands, including attorneys fees and costs, for damages or losses for death, personal injury or property damage, caused by or arising from negligent actions or omissions by any City personnel or its agents and assigns, officers, employees or representatives arising out of the above-referenced activity.

IN WITNESS WHEREOF, the parties have set their hands and seals and caused their corporate officers to sign THIS TWO-PAGE DOCUMENT the day and year first written above. By signing below, the student sign individually and asserts the authority to

execute this **RELEASE, WAIVER AND HOLD HARMLESS AGREEMENT** on  
behalf of himself.

**WITNESS:**

\_\_\_\_\_ **By:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

\_\_\_\_\_  
**PRINT NAME OF STUDENT**

**SWORN TO AND SUBSCRIBED  
BEFORE ME THIS \_\_\_\_\_ OF  
\_\_\_\_\_, 2012**

\_\_\_\_\_  
**NOTARY PUBLIC OF NEW JERSEY  
MY COMMISSION EXPIRES: \_\_\_\_\_**

**REQUEST APPROVED FOR THE  
CITY OF PATERSON LAW DEPT.**

**BY:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

\_\_\_\_\_  
**PRINT NAME AND TITLE**

**REQUEST APPROVED FOR THE  
CITY OF PATERSON POLICE DEPT.**

**BY:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

\_\_\_\_\_  
**PRINT NAME AND TITLE**