



*State of New Jersey*  
OFFICE OF THE ATTORNEY GENERAL  
DEPARTMENT OF LAW AND PUBLIC SAFETY  
DIVISION OF CRIMINAL JUSTICE  
PO Box 085  
TRENTON, NJ 08625-0085  
TELEPHONE: (609) 984-6500

**APPLICATION FOR INTERNSHIP**

The Division of Criminal Justice requires all potential interns to complete an internship application and a confidential background investigation package. The completed application form and attached certification should be returned to:

Attn: Internship Coordinator  
Division of Criminal Justice  
Richard J. Hughes Justice Complex  
25 Market Street  
P.O. Box 085  
Trenton, NJ 08625-0085  
NJDCJInternship@njdcj.org

If you have any questions concerning the application, please contact The Division at NJDCJinternship@njdcj.org or (609) 376-2378. **Your application must include your school transcript (see page 6 of the application.) Legal Interns must also include a legal writing sample. Your application will not be considered complete and will not be processed until these documents are received.** For more information about the Division of Criminal Justice, please visit [www.njdcj.org](http://www.njdcj.org).

**\*Privacy Act Notice**

You need not provide your social security number at this time but, it is requested as a convenience to the appointing authority in assembling personal data relating to your employment. You will, however, be required to provide your social security number if you accept an offer of employment. Your social security number will be used to satisfy requirements under the Internal Revenue and Social Security Acts of the United States. Also, a background investigation is required for the position for which you are applying, and your social security number will be used as an identifier in performing that investigation. All internship offers are contingent upon satisfactory completion of a confidential background investigation.

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

Permanent Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

E-Mail: \_\_\_\_\_

Best Contact Number: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Semester Application:

- Spring (January - April)
- Summer (June -August)
- Fall (September - December)

- Law School
- Undergraduate

Please check the appropriate hours per week available for the internship.

- 7 to 14 hours
- 14 to 30 hours
- 30 to 35 hours

Area of Interest (Check all that apply and circle your location preference)

- Appellate Bureau (Trenton)
- Casino Crime/Atlantic City Task Force (Atlantic City)
- Computer Crimes (Hamilton, Cherry Hill, Whippany)
- Corruption and Government Fraud (Trenton, Cherry Hill, Whippany)
- DCJ Training Academy (Sea Girt)
- Evidence/Electronic Surveillance (Trenton)
- Financial Crimes (Trenton, Whippany, Cherry Hill)
- Gangs/Organized Crime (Trenton, Whippany, Cherry Hill)
- Human Trafficking Task Force (Trenton, Cherry Hill)
- Insurance Fraud Prosecution (Trenton, Whippany)
- Motor Vehicle Commission (Trenton)
- Police Training Commission (Trenton)
- Prosecutors Supervision & Training Bureau (Trenton)
- Specialized Crimes: Auto Theft Task Force, Bias Crimes, Cargo Theft  
Environmental Crimes, Labor Prosecutions (Trenton, Cherry Hill, Whippany)
- Victims of Crime Compensation Office (Newark, Trenton)
- Office of Victim Witness Advocacy (Trenton)
- Office of Law Enforcement Professional Standards (Trenton)

Of the areas selected above, please provide additional information to assist the Division in accomodating your request if chosen for an internship.

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**COLLEGE/UNIVERSITY:** \_\_\_\_\_

Location: \_\_\_\_\_

Date of Admission: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

Major: \_\_\_\_\_ Minor: \_\_\_\_\_ GPA: \_\_\_\_\_

Degree: \_\_\_\_\_ Honors: \_\_\_\_\_

Activities: \_\_\_\_\_

**Graduate School:** \_\_\_\_\_

Location: \_\_\_\_\_

Date of Admission: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

Degree: \_\_\_\_\_ Honors: \_\_\_\_\_

Activities: \_\_\_\_\_

**Law School:** \_\_\_\_\_

Location: \_\_\_\_\_

Date of Admission: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

Degree: \_\_\_\_\_ Honors: \_\_\_\_\_

Activities: \_\_\_\_\_

Awards: \_\_\_\_\_

Publications: \_\_\_\_\_

**Civic Activities:** \_\_\_\_\_

**References:** Set forth at least two (2) names and addresses of non-relatives including one professor from your current school. Please provide complete addresses and telephone numbers.

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

**Miscellaneous** (Please use separate sheet to explain “yes” answers.)

1. Have you ever been disciplined by an employer, military establishment, or educational institution for improper conduct?

Yes

No

**CERTIFICATION**

I hereby certify that the statements made by me in this application are true, complete and correct to the best of my knowledge and belief. I agree to the terms and conditions set forth herein.

I authorize the Division of Criminal Justice to verify any and all information in my application for internship.

\_\_\_\_\_  
Signature (include Maiden Name)

Date: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
Telephone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Soc. Sec. #: \_\_\_\_\_

## REQUEST FOR OFFICIAL SCHOOL TRANSCRIPT

In order for your application to be considered complete, a transcript from the school in which you are currently enrolled must be sent to the Division of Criminal Justice. Please complete this request and send it directly to your college/law school in order to have your transcript forwarded for retention with your application.

I will receive my \_\_\_\_\_ in \_\_\_\_\_ on \_\_\_\_\_  
(Degree) (Major) (Graduation Date)

from \_\_\_\_\_  
(College/University/Law School)

located at \_\_\_\_\_  
(Address, City, State, Zip)

In connection with my application for an internship, I hereby authorize the Registrar's Office to forward my transcript to:

Attention: Internship Coordinator  
Division of Criminal Justice  
Richard J. Hughes Justice Complex  
25 Market Street  
P.O. Box 085  
Trenton, NJ 08625-0085

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

# STATE OF NEW JERSEY AFFIRMATIVE ACTION INFORMATION FORM

To Be Completed By Applicant  
Not For Interview Purposes  
To Be Filed Separately With  
Affirmative Action Officer

The *State of New Jersey* seeks to increase the richness and diversity of its workforce and in doing so become the employer of choice for all people seeking to work in State government. In order to judge the effectiveness of our efforts to attract and employ a diverse workforce, as well as comply with Federal and State reporting requirements, we ask that you take the time to answer a few brief questions.

***This form is not part of your application for employment and will not be considered in any hiring decision.*** Any information submitted on this form will be considered confidential and will be filed separately by the agency's affirmative action officer.

The *State of New Jersey* is an equal opportunity employer. The *New Jersey State Policy Prohibiting Discrimination in the Workplace* provides that applicants for employment are considered without regard to race, creed, color, national origin, nationality, ancestry, sex/gender, affectional or sexual orientation, gender identity or expression, age, marital status, civil union status, domestic partnership status, familial status, religion, atypical heredity cellular or blood trait, genetic information, liability for service in the Armed Forces of the United States or disability.

APPLICANT NAME: (Last, First, M)	APPLICANT ADDRESS:
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POSITION(S) APPLIED FOR:

DATE:	DIVISION:	GENDER: Male      Female
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**A. Ethnicity:** (Please Select One)

<b>Hispanic or Latino:</b> A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.	<b>Not Hispanic or Latino</b>
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**B. Race:** (Please Select one)

<b>American Indian or Alaska Native:</b> A person having origins in any of the original peoples of North and South America (including Central America), who maintains tribal affiliation or community attachment.	<b>Black or African American:</b> A person having origins in any of the black racial groups of Africa.
<b>Asian:</b> A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.	<b>Native Hawaiian or Other Pacific Islander:</b> A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
	<b>White:</b> A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

**The EEOC has recently updated its data collection requirements to allow employees who may be of two or more races to identify themselves. If you are of more than one race please identify them below.**

**C. Two or More Races:** (If applicable, select the two or more races with which you identify)

American Indian or Alaska Native	Black or African American	White
Asian	Native Hawaiian or Other Pacific Islander	

**If you require an accommodation for the interview process please advise the HR representative at the department where you are applying for the job.**

**REFERRAL SOURCE:**  
How did you learn of this position? \_\_\_\_\_