NEW JERSEY DEPARTMENT OF THE TREASURY INTERNSHIP APPLICATION

		PERSONAL INFOR	MATION		
Last		First		MI_	
Street Address					
City		State		ZIP	
Phone Number		Email			
Are you a U.S. citizen? Ye	es 🔲 No 🖳 🏻 If not, a	re you an alien authorized to v	vork in the U.S.? Ye	es 🗆 No 🗀	
		EDUCATIONAL INFO	RMATION		
Current School				State	
Major 1		Majo	or 2		
Concentration		Mir	10r		
Education Level:	Freshman Soph	omore 🗆 Junior 🗆 Se	enior 🗆 Gradua	te Student 🔲 Law Student	:
Are you a full-time stude	nt? Yes 🗆 No 🗆	Expected (Graduation Date (mr	m/yy)	
A full-time student is generally	y defined as one who carries	at least 12 semester credit hours as	an undergraduate or ni	ine semester credit hours as a gradu	ıate student.
		AVAILABILITY/AREA (F INTEREST		
Please select your preferre	ed work location: 🔲 Ti	enton 🔲 Atlantic City 🗀	Newark Area	Any Location	
Please indicate the semes	ter(s) you are available (select all that apply): \Box F	all/Winter 🗆 Spr	ing 🗆 Summer	
Please select your areas of	interest (select all that	apply):			
☐ Accounting	☐ Business	☐ Communication	ns/Marketing/Graphi	c Arts 🔲 Construction/Prop	perty Managemen
☐ Diversity & Inclusion		☐ Emergency Ma	nagement	☐ Finance	
Human Resources	☐ Information Tech	nology		☐ Legal/Complianc	e
☐ Legislative Affairs	Procurement				
		REFERENC	ES		
Please provide up to three professional/previous em		eferences. We encourage listin	g current academic p	professors, advisors, counselor	rs, and
Name:		Name:	1	Name:	
Company/Organization:		Company/Organization:	(Company/Organization:	
Phone Number:		Phone Number:		Phone Number:	
Email:		Email:		Email:	
Occupation:		Occupation:		Occupation:	

PERSONAL RELATIONSHIPS DISCLOSURE

In accordance with the Uniform Ethics Code adopted by the NJ State Ethics Commission and the State Policy Prohibiting Discrimination in the Workplace, the New Jersey Department of the Treasury requires the disclosure of all relatives, consensual personal relationships, and cohabitants. No Treasury employee may supervise or exercise any authority with regard to personnel actions involving his/her relative, anyone with whom there is a consensual personal relationship, or anyone with whom they cohabit.

Relative means an individual's spouse/domestic partner/civil union partner, or the individual or spouse's/domestic partner's/civil union partner's parent, child, brother, sister, aunt, uncle, niece, nephew, cousin, grandparent, grandchild, son-in-law, daughter-in-law, stepparent, stepchild, stepbrother, stepsister, half-brother or half-sister, whether the relative is related to the individual or the individual's spouse/domestic partner/civil union partner by blood, marriage or adoption.

Consensual personal relationship means marriage, engagement, dating or other ongoing romantic or sexual relationships.

Cohabitant means non-related persons who share a household under circumstances where there is financial interdependence.

Treasury requires the disclosure of all relatives and consensual personal relationships to be promptly reported directly to the Division of Administration Director's Office. Confidentiality shall be maintained to the extent possible and practicable. This information may be shared with Treasury's Ethics Office as deemed necessary. Upon receiving notice of the relationship, Administration may address any situation as necessary in consultation with the Ethics Officer. This may include, but is not limited to, changing the reporting relationships or transferring any employees/interns involved. Failure to provide notification to Treasury may result in discipline up to and including termination and the denial of legal representation and indemnification by the State in the event that a lawsuit is filed having a connection with a personal relationship. Employees are under a continuing obligation to promptly report personal relationships that develop during the course of their employment.

	I DO NOT have a relative or a consensual personal relationship, as defined above, with anyone working for any of the Divisions or In-But-Not-of Agencies under the New Jersey Department of the Treasury.							
	I DO have a relative or a consensual personal relationship, as defined above, with someone working for a Division or or an In-But-Not-of Agency under the New Jersey Department of the Treasury, identified as follows:							
	Name	Relationship	Division/Agency	Job Title				
		1/10						
			'					
ACKNOWLEDGEMENT & SIGNATURE								
I certify that the information on this form to the best of my knowledge and belief is true, complete and accurate. I understand that any misleading or incorrect information, willful misstatement, or omission of a material fact may be just								

cause for disciplinary action up to and including termination. I understand my obligation to promptly report personal

Date

By checking this box, I acknowledge that I am expected to attend the entire internship program as agreed

By checking this box and typing my name below, I am electronically signing this application. I understand

that an electronic signature has the same legal effect as a written signature.

relationships that develop during my employment.

with Treasury Management.

Signature