



## Arrest Reporting Form

Employee Name \_\_\_\_\_ Reporting Date \_\_\_\_\_

Position \_\_\_\_\_ ☐ Certificated ☐ Non-Certificated

Date of Arrest and/or Indictment \_\_\_\_\_ City/County \_\_\_\_\_

Explain the charges:

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Disposition of Charges:

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New Jersey Administrative Code N.J.A.C. 6A:9-17(1) requires that "(c) All certificate holders shall report their arrest or indictment for any crime or offense to their Superintendent within fourteen (14) calendar days. The report shall include the date of the arrest or indictment and charge(s) lodged against the certificate holder. The certificate holder shall also report to their Superintendent the disposition of any charges within seven (7) calendar days of the disposition. Failure to comply with these reporting requirements may be deemed 'Just Cause' pursuant to N.J.A.C. 6A:9-17.5.

Employee Signature \_\_\_\_\_

Date \_\_\_\_\_