

NEW JERSEY DEC/DRE PROGRAM 2025 Application for DRE Training



V		Y
Name:	Rank:	Badge #:
Agency:	County/Station:	
Years of Service: Cell Phone #:		
Number of DWI Arrests 2022: 2023: _		
Supervisor: Email:		Phone #:
PREREQUISITES TO BE CONSIDERED FOR TI		_
1. Attended the NJSP DWI/HGN course and be prof	ficient in the administration of S	SFSTs
2. Attended ARIDE (Advanced Roadside Impaired D		
3. MUST be able to write a descriptive, detailed DW administer and document the SFSTs as trained.	I report which demonstrates the	officer's ability to
4. Officer/Trooper must be willing to be recalled to pe	erform evaluations on suspected	d drug impaired drivers.
TO BE INCLUDED WITH APPLICATION:		
Copy of DWI/HGN Course Certificate.		
2. Copy of ARIDE Course Certificate.		
3. Copy of one DWI report which is indicative of offi	1	se restrict submissions to
The DWI report narrative (SFTSs must be in prope	er order).	
REQUIREMENTS AFTER CERTIFIED:		
1. Must perform a minimum of four acceptable evalureviewed and approved by a certified DRE instructor switnessed in person by a certified DRE instructor or person by	since the date of last certification	n. One of which shall be
2. Must complete and submit verification of a minim completed since the date of the DRE's most recent cert	num of 8 hours of DEC Program	
*** Failure to meet the above requirements may result	in the decertification of the DR	RE.
*** Department/Station dedication to the program is m	nandatory.	
RECOMMENDATION OF A CERTIFIED DRUG	RECOGNITION EVALUAT	OR:
DRE's Name:	DRE	#
Please list any prior certifications or training which wo (ARIDE, EMT, paramedical training, etc.):	ould enhance the officer's ability	to complete DRE training
Officers selected for training will be notified via e-mail.		•
EMAIL APPLICATION TO: DRES David.Napol	itano@njsp.gov	politano #/23/
Official Use Only: Date Received:	Date Processed:	
☐ APPROVED ☐ DENIED Comments:		