### Township of Mullica PO Box 317 Elwood, NJ 08217

# **Employment Application:** Date: \_\_\_\_\_ **Applicant Information:** Name (Last, First, Middle): Address: City/Town: Phone (Work): ( )\_\_\_\_\_\_ (Home): ( )\_\_\_\_\_ Social Security Number: \_\_\_\_\_ - \_\_\_ - \_\_\_\_ Position applied for: Have you ever applied to the township before: \_\_\_\_ Yes \_\_\_\_No If yes, give date\_\_\_\_\_ Date you can start: \_\_\_\_\_ Salary desired: \_\_\_\_\_ Are you available to work: \_\_\_\_ Full time\_\_\_\_ Part time\_\_\_ Shift work \_\_\_\_ Temporary Are you currently employed: \_\_\_\_Yes \_\_\_\_No May we contact you at work: \_\_\_\_Yes \_\_\_\_No May we contact your current employer: \_\_\_\_ Yes \_\_\_\_No Are you currently on layoff status and subject to recall: \_\_\_\_Yes \_\_\_\_No Do you possess a current driver's license: \_\_\_\_Yes \_\_\_\_ No Do you possess a current commercial driver's license: \_\_\_\_ Yes \_\_\_\_ No Please list any endorsements: If you are under eighteen years of age, can you provide proof of eligibility to work: \_\_\_Yes\_\_No Are you legally eligible to work in the United States of America: \_\_\_\_Yes \_\_\_\_ No

The Township is an Equal Opportunity Employer M/F

Pursuant to Federal Law, proof of US Citizenship or immigration status will be required if you are hired.

**Employment History:** This section must be completed even if you attach a resume. List your last four employers, major assignments within the same employer. Begin with the most recent. Include any military service. Explain any gaps in employment in the space on this form marked comments located on the bottom of this page.

Employer:	Date started:	Date left:	Work performed/ responsibilities:
Address:			responsibilities.
	Starting Salary:		]
Job Title:	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:			
May we contact for a reference:YesNo			
Employer:	Date started:	Date left:	Work performed/ responsibilities:
Address:			
	Starting Salary:		
Job Title:	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:			
May we contact for a reference:YesNo			
Employer:	Date started:	Date left:	Work performed/
Address:			responsibilities:
	Starting Salary:		
Job Title:	Final Salary:		
Reason for leaving:			•
Supervisor's name and phone number:			
May we contact for a reference:YesNo			
Employer:	Date started:	Date left:	Work performed/
Address:			responsibilities:
	Starting Salary:		1
Job Title:	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:			
May we contact for a reference:YesNo			

#### **Comments:**

Education: Provide information on your formal schooling and education. Include elementary, secondary, and post-secondary education, if any. Include any formal vocational or professional education. For high school and post-secondary education, indicate any major or specialty, such as Academic, Business, or Trade.

School:	Years completed: (Circle)	Graduated: (Circle)	Major Field:
High:	1 2 3 4	Yes No	
College:	1 2 3 4	Yes No	
Other:	1 2 3 4	Yes No	

Languages: List any foreign languages you know and indicate your level of proficiency.

Language:	Speak Some:	Speak Fluently:	Read:	Write:

	ions or oth								ce, training, ion for whic	
Commo		dditiona	l Inform	ation:	Is th	ere any	additio	onal infort	nation about	you we
								·		

**References:** Provide the names, addresses and phone numbers of three people whom we may contact as a reference. They should <u>not</u> be relatives or former supervisors.

Name & Address:	Phone Number:	Years Known:

#### **Understandings and Agreements:**

As an applicant for a position with the township, I understand and agree that I must provide truthful and accurate information in this application. I understand that my application may be rejected if any information is not complete, true and accurate. If hired, I understand that I may be separated from employment if the township later discovers that information on this form was incomplete, untrue, or inaccurate. I give the township the right to investigate the information I have provided, talk with former employers (except where I have indicated they may not be contacted). I give the township the right to secure additional job-related information about me. I release the township and its representatives from all liability for seeking such information. I understand that the township is an equal-opportunity employer and does not discriminate in its hiring practices. I understand that the township will make reasonable accommodations as required by the Americans with Disabilities Act. I understand that, if employed, I may resign at any time and that the township may terminate me at any time in accordance with its established policies and procedures. No representatives of the township may make any assurances to the contrary. I understand that any offer of employment may be subject to job-related medical, physical, drug, or psychological tests. I also understand that some positions may involve complete background and criminal checks. For your application to be considered, you must sign and date below.

considered, you must sig	n and date below.		
Applicant's Signature_		Date	

## **Voluntary Affirmative Action Information**

You are <u>not</u> required to provide this information. Provide only if you wish.

If you provide information on this page, it will be filed separately from the job application. This information will be used only for purposes of the affirmative action program

Applicant Information:		
Phone: ( )		
Position Applied For:		
How did you learn abou	t this position?Advertise	ementEmployment Agency
FriendRelativeWalk-in	Other (Explain)	
Information Regarding S Gender:		
Male	Female	
Equal Employment Opportunit White African-America Hispanic		
American Indian	Alaskan native	
Asian/Pacific Isla	nder	
Other		
Other protected Groups:Individual with a	disability	
Vietnam-era vete Disabled veteran	ran (served between 1964 and 1975	5)
	For township use only	
Hired:YesNo Position _		Oate
Which EEO job classification be	est describes the position for which	the applicant applied?
1. Officials and Managers	4. Sales workers	7. Operators( semi-skilled)
2. Professionals	<ul><li>5. Office and clerical workers</li><li>6. Craft workers (skilled)</li></ul>	8. Laborers (unskilled)
3. Technicians	o. Craft workers (skilled)	9. Service workers
	Date	

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Results of interview	

Interviewer: _		
Date:	Time:	