# WEST AMWELL TOWNSHIP

609-397-2054; 609-397-8634 fax
150 Rocktown-Lamb. Road, Lambertville NJ 08530

**Date:** _____

## Employment Application as of 3/1/2015

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

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**The Township is an Equal Opportunity Employer M/F**

**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:**<br>**Address:** | **Date started:** **Date left:** | **Work performed/ responsibilities:** |
| **Job Title:** | **Starting Salary:**<br>**Final Salary:** | |
| **Reason for leaving:** | | |
| **Supervisor's name and phone number:**<br>**May we contact for a reference: Yes No** | | |
| **Employer:**<br>**Address:** | **Date started:** **Date left:** | **Work performed/ responsibilities:** |
| **Job Title:** | **Starting Salary:**<br>**Final Salary:** | |
| **Reason for leaving:** | | |
| **Supervisor's name and phone number:**<br>**May we contact for a reference: Yes No** | | |
| **Employer:**<br>**Address:** | **Date started:** **Date left:** | **Work performed/ responsibilities:** |
| **Job Title:** | **Starting Salary:**<br>**Final Salary:** | |
| **Reason for leaving:** | | |
| **Supervisor's name and phone number:**<br>**May we contact for a reference: Yes No** | | |
| **Employer:**<br>**Address:** | **Date started:** **Date left:** | **Work performed/ responsibilities:** |
| **Job Title:** | **Starting Salary:**<br>**Final Salary:** | |
| **Reason for leaving:** | | |
| **Supervisor's name and phone number:**<br>**May we contact for a reference: Yes No** | | |

## 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: |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |

**Special Skills & Experience:** State any special skills, experience, training, licenses, certifications or other factors that make you especially qualified for the position for which you are applying.

_____

_____

_____

_____

**Comments & Additional Information:** Is there any additional information about you we should consider?

_____

_____

_____

_____

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

| Name & Address: | Phone Number: | Years Known: |
|---|---|---|
| | | |
| | | |
| | | |

## Understandings and Agreements:

**As an applicant for a position with the Township of West Amwell, 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 of West Amwell later discovers that information on this form was incomplete, untrue, or inaccurate. I give the Township of West Amwell 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 of West Amwell the right to secure additional job-related information about me. I release the Township of West Amwell and its representatives from all liability for seeking such information. I understand that the Township of West Amwell is an equal-opportunity employer and does not discriminate in its hiring practices. I understand that the Township of West Amwell 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 of West Amwell may terminate me at any time in accordance with its established policies and procedures. No representatives of the Township of West Amwell 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.***

**Applicant's Signature** _____ **Date** _____

# Voluntary Affirmative Action Information

**You are not 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:

**Name:** _____

**Address:** _____

**City/town:** _____

**Phone: (  )** _____

## Position Applied For: _____

## How did you learn about this position? __Advertisement __Employment Agency __Friend __Relative __Walk-in __Other (Explain)_____

## Information Regarding Status:

**Gender:**

_____Male

_____Female

**Equal Employment Opportunity identification groups:**

_____White

_____African-American (non-Hispanic)

_____Hispanic

_____American Indian/Alaskan native

_____Asian/Pacific Islander

_____Other_____

**Other protected Groups:**

_____Individual with a disability

_____Vietnam-era veteran (served between 1964 and 1975)

_____Disabled veteran

**For Township of West Amwell use only**

**Hired: __Yes __No Position** _____ **Date** _____

**Which EEO job classification best describes the position for which the applicant applied?**

| | | |
|---|---|---|
| 1. Officials and Managers | 4. Sales workers | 7. Operators( semi-skilled) |
| 2. Professionals | 5. Office and clerical workers | 8. Laborers (unskilled) |
| 3. Technicians | 6. Craft workers (skilled) | 9. Service workers |

**Township Official**_____ **Date**_____

**This page for Township of West Amwell use only!**
**Results of interview**

**Interviewer:**

_____

**Date:** _____ **Time:** _____