

Township of Marlboro

APPLICATION FOR EMPLOYMENT

Applicant Name:		Date:
Present Address:		
Telephone:	Social Security No.:	
Permanent Address (If different from present address):		
Are you 18 years old or older? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you either a U.S. citizen or an alien authorized to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No	
POSITION DESIRED		
Position desired:	Date you are available to start:	
Do you prefer: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time If part-time, hours you are available to work:		
Have you previously worked for Marlboro Township? If yes, please list dates.		
Reason for leaving: _____ Former supervisor(s): _____		
EDUCATION		
High School:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
Technical School:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
College/University:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
Other education or training:		
Other special skills:		
WORK EXPERIENCE		
Please list all previous employment, beginning with the most recent. If you need more room, you may attach another sheet of paper.		
Employer:	Address:	
From to	Position Held:	Reason for leaving:
Supervisor's Name & Title:		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of Duties:		
Starting Salary:	Final Salary:	

Employer:		Address:	
From	to	Position Held:	Reason for leaving:
Supervisor's Name & Title:			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of Duties:			
Starting Salary:		Final Salary:	
Employer:		Address:	
From	to	Position Held:	Reason for leaving:
Supervisor's Name & Title:			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of Duties:			
Starting Salary:		Final Salary:	
REFERENCES			
Please list the names of three business persons known, but not related, to you for at least three years.			
<i>Name</i>	<i>Title</i>	<i>Business</i>	<i>Telephone</i>
1. _____			
2. _____			
3. _____			
COMMENT			
List any comments or qualifying statements you care to make.			

AUTHORIZATION AND ACKNOWLEDGMENTS			
I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that if I am employed, any false statements on this application may be grounds for dismissal.			
I authorize investigation of all statements contained in this application. I also grant permission to contact all references listed above, and authorize them to release all information concerning my previous employment and any other pertinent information these references might have, personal or otherwise. I release all parties from all liability for any damage that may result from furnishing this information to you.			
I understand and agree that, if hired, my employment is for no definite period and may be terminated at any time and without prior notice.			
Applicant Signature: _____ Date: _____			