

# DUNELLEN POLICE DEPARTMENT

355 NORTH AVENUE

DUNELLEN, NEW JERSEY 08812

PHONE: (732) 968-3000 FAX: (732) 968-8078

## Employment Application For Crossing Guard / Substitute Crossing Guard

The Borough of Dunellen is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability/handicap, or veteran status.

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### Personal:

Name \_\_\_\_\_ Date \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Number & Street City State Zip Code

Phone Number \_\_\_\_\_ Date Available \_\_\_\_\_

Email Address \_\_\_\_\_ Social Security Number \_\_\_\_\_

Are you over 18 years old? ☐ Yes ☐ No

Are you legally eligible for employment in the United States? ☐ Yes ☐ No  
(If offered employment, you will be required to provide documentation for verify eligibility)

Have you ever been employed in any facility of Dunellen? ☐ Yes ☐ No  
If so, please state facility name, location, and dates of employment \_\_\_\_\_

Do you have any special medical conditions that would hamper you from being a crossing guard? ☐ Yes ☐ No If yes, explain \_\_\_\_\_

Do you possess a valid U.S. Driver's License? ☐ Yes ☐ No

Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

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**Education:** Please indicate your level of education or training.

**High School:** Number of years completed (circle one) 1 2 3 4

**Diploma:** \_\_\_ Yes \_\_\_ No      **G.E.D.:** \_\_\_ Yes \_\_\_ No

**School(s)** \_\_\_\_\_ **City/State** \_\_\_\_\_

**College and/or Vocational School:**

Number of years completed (circle one) 1 2 3 4

**School** \_\_\_\_\_ **City/State** \_\_\_\_\_

**Major** \_\_\_\_\_ **Degrees Earned** \_\_\_\_\_

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**Record of Conviction:**

During the last ten years, have you ever been convicted of a crime other than a minor traffic offense? \_\_\_ Yes \_\_\_ No

If yes, explain: \_\_\_\_\_

(A conviction will not necessarily automatically disqualify you for employment. Rather, such factors as age and date of conviction, seriousness and nature of the crime, and rehabilitation will be considered.)

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**Employment:** If you wish to describe additional work experience, please attach resume.  
List last employer first, including U.S. Military Service.

May we contact your present employer? \_\_\_ Yes \_\_\_ No

**Employer** \_\_\_\_\_ **Address** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **Position** \_\_\_\_\_

**Dates of Employment:** From \_\_\_\_\_ To \_\_\_\_\_

Mo/Yr Mo/Yr

**Salary** \_\_\_\_\_ **Supervisor** \_\_\_\_\_ **Department** \_\_\_\_\_

**Duties** \_\_\_\_\_ **FT** \_\_\_ **PT** \_\_\_ **No. of Hours** \_\_\_\_\_

**Reason for Leaving** \_\_\_\_\_

Employer \_\_\_\_\_ Address \_\_\_\_\_

Telephone: \_\_\_\_\_ Position \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Mo/Yr Mo/Yr

Salary \_\_\_\_\_ Supervisor \_\_\_\_\_ Department \_\_\_\_\_

Duties \_\_\_\_\_ FT \_\_\_\_\_ PT \_\_\_\_\_ No. of Hours \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Explain any gaps in work history? \_\_\_\_\_

Have you ever been discharged or asked to resign from a job? \_\_\_\_ Yes \_\_\_\_ No

If yes, explain \_\_\_\_\_

\_\_\_\_\_

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### References:

#### Professional

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_

Email: \_\_\_\_\_

#### Personal (Non-related)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_

Email: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_

Email: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_

Email: \_\_\_\_\_

**Applicant's Certification and Agreement:**

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize Dunellen to verify their accuracy and to obtain reference information on my work performance. I hereby release Dunellen from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that should an employment offer be extended to me and accepted that I willfully adhere to the policies, rules and regulations of employment of the employer. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the employer may terminate my employment at any time with or without notice or cause.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_