

355 North Avenue
Dunellen, NJ 08812

BOROUGH OF DUNELLEN
NEW JERSEY

Phone (732) 968-3033
Fax (732) 968-8605



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

Application Information:

Last Name: _____ First Name: _____ Middle: _____

Address: _____

City/Town: _____

Phone (Cell): _____

Position Sought: _____

Social Security Number: _____

Email: _____

Are you legally eligible to work in the United States of America? ☐ Yes ☐ No

(In accordance with Federal Law, proof of US Citizenship or immigration status will be required if you are hired)

Date you can start: _____ Salary desired: _____

Are you currently employed? ☐ Yes ☐ No

May we contact your current employer? ☐ Yes ☐ No

Have you ever applied to the Township before? ☐ Yes ☐ No If yes, give date and dept: _____

If you are under eighteen years of age, can you provide required proof of eligibility to work? ☐ Yes ☐ No

Are you available to work: ☐ Full Time ☐ Part Time

Do you possess a current driver's license? ☐ Yes ☐ No Number: _____

Has it ever been suspended? ☐ Yes ☐ No Is your driver's license currently valid? ☐ Yes ☐ No

Employment History

This section is to be completed even if you attach a resume to your application. List your last three employers, major assignments within the same company, or volunteer efforts. Start with the most recent, including any military service. If there are any gaps in employment, asked to resign or been discharged please explain in the additional information section below.

Employer 1

Employer: _____ Date Started: _____ Date Left: _____

Address: _____ Job Title: _____

Duties:

Supervisor: _____ Phone #: _____ Full Time Part Time No. of Hrs. _____

Reason for Leaving: _____

Employer 2

Employer: _____ Date Started: _____ Date Left: _____

Address: _____ Job Title: _____

Duties:

Supervisor: _____ Phone #: _____ Full Time Part Time No. of Hrs. _____

Reason for Leaving: _____

Employer 3

Employer: _____ Date Started: _____ Date Left: _____

Address: _____ Job Title: _____

Duties:

Supervisor: _____ Phone #: _____ Full Time Part Time No. of Hrs. _____

Reason for Leaving: _____

Additional Information: _____

Education

Please indicate education or training which you believe qualifies you for the position in which you are seeking.

School	Years Completed	Graduated	School / Location	Major/Field
High School				
Vocational				
College				
Other (Training or Degrees)				

Languages List any foreign languages that you speak.

Language	Fluent	Some

Skills, Licenses & Experiences State any skills, licenses, memberships, training or experiences that you feel qualify you for this position.

Professional License or Membership:

Type of License (s) held: _____

State of (State Name) License Number: _____

License Expiration Date: _____

Other Professional Memberships: _____

Skills and Experiences: _____

(You need not disclose membership in professional organizations that may reveal any information regarding race, color, religion, age, sex, national origin, disability or handicap, or veteran status.)

Additional Information Is there any additional information that we should know about you to consider you for the position you are applying for? _____

References Provide the names, address and phone numbers of 4 different people (2 professional and 2 personal) whom we may contact as a reference. They should not be relatives.

Professional

Name: _____ Address: _____

Phone Number: _____ Email: _____

Years Known: _____

Name: _____ Address: _____

Phone Number: _____ Email: _____

Years Known: _____

Personal

Name: _____ Address: _____

Phone Number: _____ Email: _____

Years Known: _____

Name: _____ Address: _____

Phone Number: _____ Email: _____

Years Known: _____

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 the Borough of Dunellen to verify their accuracy and to obtain reference information on my work performance. I hereby release the Borough of 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 will fully adhere to the policies, rules, and regulations of employment of the Employer. However, I further understand that neither the policies, rules, regulations of the 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 indefinite duration and at will and that either I or the Employer may terminate my employment at any time with its established policies and procedures. I understand that any offer of employment is conditional on the applicant passing a criminal background check.

Applicant's Name

Date