

EMPLOYMENT APPLICATION

BOROUGH OF WALDWICK

63 Franklin turnpike Waldwick, New Jersey 07463 201-652-5300 201-652-4143 (fax)

POSITION FOR WHICH YOU ARE A	APPLYING:	
APPLICANT INFORMATION		
Name (Last, First, Middle):		
Address:		
City:	State:	Zip:
Phone (daytime): ()	Phone (home): ()	
E-mail Address:		
	•	
Are you legally eligible to work in a (In accordance with Federal Law, proof of are hired.)		
Have you ever been employed by th	e Borough of Waldwick? Yes	s No
Give the name of any of your relati the Borough of Waldwick:	ves (by blood or marriage) who	currently works for
Are you related to any member of t If yes, please give the name of the (<u> </u>	

EDUCATION

Did you graduate from high school?

If no, do you have a GED	?	Yes	No				
Colleges or Universities		City/State/County	Maj	or	Total Earned Credits	Degree received (AA,BS,MBA etc.)	
Trade or Other Special	<u> </u>	<u> </u>					
Schools		Name of Course or T	raining	Con	ompleted Satisfactorily?		
					z'es	No	
					res	No	
				<u> </u>	res	No	
List any of your professional, trade, business, or civic activities that relate to the position you seek (if you prefer, do not need to list any activities that might indicate race, color, religion, gender, marital status, national origin, age, or disability).							
DRIVER'S LICENSE							
Please list the state where you are licensed: Driver's license #:							
If a Commercial Driver's license is required for this position, do you possess a valid NJ CDL? Yes No							
If yes, give # and class of license:							
List license restrictions of	her	than eye glasses:					

Yes

No

EMPLOYMENT HISTORY

Begin with your current or most recent position, and go back at least 10 years, if applicable. Show all employers and explain any gaps in employment. Include all paid and unpaid experience you think qualifies you for this position. Also include any military service. Use additional sheets, if needed, to show full employment history.

Dates of employment (month/year)	Title	Hrs/week	
Employer's name	Employer's address (include town, state, ZIP)		
		*	
Name & title of immediate supervisor		Supervisor's ph	one
May we contact supervisor?	□ LATER □ NO		×
Reason for leaving position			
Describe your duties:			
	2		
Dates of employment (month/year)	Title	Hrs/week	-
Employer's name	Employer's address (include town, state, ZIP)		
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May we contact supervisor? Reason for leaving position	□ LATER □ NO		
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Name & title of immediate supervisor Supervisor's phone			one
May we contact supervisor? ☐ YES ☐ LATER ☐ NO			
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Reason for leaving position				
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Describe your duties:				
Describe your duties.	Describe your duties:			
	Describe your duties.			

SPECIAL SKILLS & EXPERIENCE List any special skills, computer knowledge, training, licenses, certifications, languages you speak/read/write, or other factors that make you especially qualified for the position you are applying.			
COMMENTS & ADDITIONA Is there any additional informa	L INFORMATION tion about you we should consider	der?	
REFERENCES Please provide the names and telephone numbers of three people whom we may contact. They should not be relatives or former supervisors. You may include coworkers and professional colleagues.			
Name	Phone Number	Years Known	
UND	ERSTANDINGS & AGREEME	ENTS	
truthful and accurate information in application. I understand that my a accurate. If hired, I understand that information on the form was incomp Authorization to Release Informat information I have provided and to contacted). I give the Borough the Borough of Waldwick, its representation about me from all claims and liability information about me. I release from	the Borough of Waldwick, I understand this application and on any supplement I may be separated from employment I may be separated from employment of the Borough of Waldwick contact former employers (except who right to secure additional job-related actives, and all persons and organizating arising out of the Borough's investment of the	entary material submitted with this ormation is not complete, true and t if the Borough later discovers that the right to investigate the ere I have indicated they may not be information about me. I release the ons from which it seeks information tigation or from supplying accurate provides the Borough of Waldwick	
I understand that the Borough of Waldwick is an equal-opportunity employer and does not discriminate in its hiring or other personnel practices. I understand that the Borough will make reasonable accommodations as required by Federal and/or State law.			
I understand that, if employed, I will be an employee at will. Accordingly, I may resign at any time and the Borough may discharge me at any time for any reason or for no reason at all. No Borough representative may make any assurances to the contrary.			
I also understand that I may be requexamination, psychological test, and	of of U.S. citizenship or the legal right ired to pass a pre-employment drug to don't other tests relevant to the position ety, public works, and access to confi- iminal checks.	est, medical examination, physical on I seek. I also understand that	
Applicant Signature:		Date:	