



TOWNSHIP OF HARDING EMPLOYMENT APPLICATION

21 Blue Mill Road, P.O. Box 666
New Vernon, New Jersey 07976
(973) 267-8000

The Township of Harding is an Equal Opportunity Employer

Date: _____

APPLICANT INFORMATION:		
Last name:	First Name:	Middle Initial:
Address:	City:	State/Zip Code:
Work Phone:	Home Phone:	
Social Security Number:		

POSITION AND WORK INFORMATION:					
Position applied for:					
Have you ever applied to the Township before:		Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, give date:	
Date you can start:			Salary desired:		
AVAILABILITY:	Full Time <input type="checkbox"/>	Part time <input type="checkbox"/>	Shift work <input type="checkbox"/>	Temporary <input type="checkbox"/>	
Are you currently employed?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	May we contact you at work?		Yes <input type="checkbox"/> No <input type="checkbox"/>
May we contact your current employer?				Yes <input type="checkbox"/> No <input type="checkbox"/>	
Are you currently on layoff status and subject to recall?				Yes <input type="checkbox"/> No <input type="checkbox"/>	
Do you possess a current driver's license?				Yes <input type="checkbox"/> No <input type="checkbox"/>	
Do you possess a current commercial driver's license?				Yes <input type="checkbox"/> No <input type="checkbox"/>	
Please list any endorsements:					
If you are under eighteen years of age, can you provide proof of eligibility to work?				Yes <input type="checkbox"/> No <input type="checkbox"/>	
Are you legally eligible to work in the United States of America?				Yes <input type="checkbox"/> No <input type="checkbox"/>	

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

This section must be completed even if you attached a resume. List your last four employers and major assignments within the same employer. Begin with the most recent. Include any military service and explain any gaps in employment in the same space on this form marked Comments, located on the bottom of the page.

EMPLOYMENT HISTORY:					
Employer:		Date Started:		Date left:	
Address:		Starting Salary:		Final Salary:	
Job Title:		Work performed/ responsibilities:			
Reason for leaving:					
Supervisor's name & number:			May we contact for a reference?		Yes <input type="checkbox"/> No <input type="checkbox"/>
Employer:		Date Started:		Date left:	
Address:		Starting Salary:		Final Salary:	
Job Title:		Work performed/ responsibilities:			
Reason for leaving:					
Supervisor's name & number:			May we contact for a reference?		Yes <input type="checkbox"/> No <input type="checkbox"/>
Employer:		Date Started:		Date left:	
Address:		Starting Salary:		Final Salary:	
Job Title:		Work performed/ responsibilities:			
Reason for leaving:					
Supervisor's name & number:			May we contact for a reference?		Yes <input type="checkbox"/> No <input type="checkbox"/>
Employer:		Date Started:		Date left:	
Address:		Starting Salary:		Final Salary:	
Job Title:		Work performed/ responsibilities:			
Reason for leaving:					
Supervisor's name & number:			May we contact for a reference?		Yes <input type="checkbox"/> No <input type="checkbox"/>

Provide information on your formal schooling and education. Include elementary, secondary, and post-secondary education, if any. Include and formal vocational or professional education. For high school and post-secondary education, indicate any major or specialty such as Academic, Business, or Trade.

EDUCATION:							
School Level	Years Completed (check)				Graduated (check)		Major Field
Elementary	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> Yes	<input type="checkbox"/> No	N/A
High	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
College	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Other	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

List any foreign languages you know and indicate your level of proficiency.

LANGUAGES:	Speak Some	Speak Fluently	Read	Write

SPECIAL SKILLS AND EXPERIENCE: State any special skills, experience, training, licenses, certifications or other factors that make you especially qualified or the position for which you are applying.

COMMENTS AND INFORMATION: Is there any additional information about you we should consider?

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

REFERENCES:		
Name and Address	Phone Number	Years Known

UNDERSTANDINGS AND AGREEMENTS:

As an applicant for a position with the Township of Harding, 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 later discovers that information on this form was incomplete, untrue, or inaccurate. I give the Township of Harding the right to investigate the information I have provided and to talk with former employers (except where I have indicated they may not be contacted). I give the Township the right to secure additional job-related information about me. I release the Township of Harding and its representatives from all liability for seeking such information. I understand that the Township of Harding is an equal-opportunity employer and does not discriminate in its hiring practices. I understand that the Township will make reasonable accommodations as required by the American Disabilities Act. I understand that, if employed, I may resign at any time and that the Township may terminate me at any time in accordance with its established policies and procedures. No representatives of the Township 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.

Applicant's Signature: _____

Date: _____

CONDITIONS OF EMPLOYMENT:

Please be advised that all offers that all offers of employment are conditional on the applicant passing a mandatory criminal background check and drug test. A pre-employment physical may also be required. Pursuant to our personnel policy, all job applicants are required to sign a consent form for drug testing and if the test results are positive and are not accounted for by the legal use of prescription or non-prescription drugs the applicant shall be ineligible for hire unless he/she can establish a legal basis for the use of the drug or controlled substance for which he/she tests positive. For your application to be considered you must sign and date below.

Applicant's Signature: _____

Date: _____