

# Application for Employment

Borough of Morris Plains  
531 Speedwell Avenue  
Morris Plains, NJ 07950



We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of non-job-related medical condition or handicap, or any other legally protected status.

PLEASE PRINT

Position(s) Applied For	Date of Application	
How did you learn about us?		
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk-In
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other: _____

Last Name	First Name	Middle Name
Address    Number    Street    City    State    Zip Code		
Telephone Number (s) Home		Cell
Email Address	Social Security Number	
	<input type="text"/>	<input type="text"/>

If you are under 18 years of age, can you provide required proof of your eligibility to work? ☐ YES ☐ NO

Have you ever filed an application with us before? ☐ YES ☐ NO

If Yes, give date: \_\_\_\_\_

Have you ever been employed by us before? ☐ YES ☐ NO

If Yes, give date: \_\_\_\_\_

Are you currently employed? ☐ YES ☐ NO

May we contact your present employer? ☐ YES ☐ NO

Are you prevented from lawfully becoming employed in the country because of Visa or Immigration Status? ☐ YES ☐ NO

*proof of citizenship or immigration will be required upon employment*

What date would you be available for work? \_\_\_\_\_

Are you able to work: (please circle all that apply)    Full Time    Part Time    Shift Work    Temporary

Are you currently on "lay-off" status and subject to recall? ☐ YES ☐ NO

Can you travel if the job requires it? ☐ YES ☐ NO



# Education / Special Skills

	Elementary School	High School	Undergraduate College/University	Graduate Professional
School Name and Location				
Years/Grade Completed	3   4   5   6   7   8	9   10   11   12	1   2   3   4	1   2   3   4
Diploma/Degree				
Describe course of study				
Describe any specialized training, apprenticeship skills and extra-curricular activities.				
Describe any honors you have received.				
State any additional information you feel may be helpful to us in considering your application				

Indicate any foreign languages you can speak, read and/or write

	Fluent	Good	Fair
Speak			
Read			
Write			

List professional, trade, business or civic activities and offices held.

*You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, handicap or other protected status.*


## References

Give name, address and telephone number of three references who are not related to you and are not previous employers.

1.	
2.	
3.	

Have you ever had any job related training in the United States Military? ☐ YES ☐ NO

If yes, please describe: \_\_\_\_\_

Are you physically or otherwise unable to perform the duties of the job for which you are applying? ☐ YES ☐ NO



# Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

1	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)			
	Job Title			
Reason for Leaving				
2	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)			
	Job Title			
Reason for Leaving				
3	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)			
	Job Title			
Reason for Leaving				
4	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)			
	Job Title			
Reason for Leaving				

If you need additional space, please continue on a separate sheet of paper.

## Special Skills and Qualifications

Summarize special job related skills and qualifications acquired from employment or other experiences.

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## Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of the organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also, that I am required to abide by all rules and regulations of the employer.

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

\_\_\_\_\_  
Date

### **For Personnel Department Use Only**

Arrange Interview ☐ YES ☐ NO

Remarks: \_\_\_\_\_

\_\_\_\_\_  
Interviewer

\_\_\_\_\_  
Date

Employed ☐ YES ☐ NO

Date of Employment: \_\_\_\_\_

Job Title: \_\_\_\_\_ Hourly Rate/Salary: \_\_\_\_\_ Department: \_\_\_\_\_

By: \_\_\_\_\_

\_\_\_\_\_  
Name and Title

\_\_\_\_\_  
Date

**NOTES:** \_\_\_\_\_

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