

Rev. 082011

The Township of Green Brook EMPLOYMENT APPLICATION

Attn: Administrator's Office 111 Greenbrook Road, Green Brook, NJ 08812 ADA/EOE

The Township of Green Brook considers applicants for all positions without regard to age, race, creed, color, national origin, ancestry, marital or veteran status, gender, affectional or sexual orientation, domestic partnership status, disability, or any other characteristic protected from discrimination by law.

(PLEASE CLEARLY PRINT OR TYPE ALL INFORMATION) Date of Application: Name: _____ Position(s) Applying For: (or type of work sought, or department of interest) A RESUME IS NOT A SUBSTITUTE FOR COMPLETING THIS FORM IN ITS ENTIRETY. Instructions for completing this application: Resumes can be submitted with the application, however, all questions on this application must be fully answered. Do not indicate "See Resume" on any part of this application and leave sections blank. This application requests more information than a resume provides. If a question does not apply, please write N/A. Please indicate the specific position for which you are applying. If you are not applying for a specific job opening, please indicate of the type of work desired (ex. administrative, management) and/or the department of interest (ex. Clerk, Public Works). . Do not abbreviate the name of your employers or education. Provide complete addresses and telephone numbers for all employers, references, and educational institutions. Be sure to sign and date the last page of this application in the Applicant's Statement section. Faxed and emailed applications are not accepted – if the employment application is faxed or emailed, it must be followed up with a hard copy via regular mail. To be considered for a specific posting, all applications must be received by the Township Administrator by the deadline date and time listed in the ad. All information obtained will be kept confidential and will be provided only to persons involved in the screening and hiring process. PLEASE NOTE: Due to the large number of applications we receive only those candidates being considered for an interview will be contacted. DO NOT WRITE BELOW THIS LINE - FOR PERSONNEL DEPARTMENT USE ONLY Position applied for is open? ☐ Yes ☐ No Date Received (Date stamped) Comments

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Personal Information

Last Name	First Name	Middle	Initial
Address	City	State	Zip Code
Telephone #s	Social S	Security #	
Email address			
How did you learn about this position Newspaper Advertisement; pleas			
☐ Website ☐ Relative/friend/e	tc. \square Inquiry \square Employment	t Agency	
Other (please specify)			
If you are under 18 years of age, ca	an you provide the necessary proo	f of your eligibility to work	□Yes □No</td
Have you ever been employed by [or previously applied for employ	ment with □the Towns	ship of Green
Brook? If so, please check the app	propriate box above and supply the	e following information:	
Month/Year Applied or time period	worked	Dept Worked for	
Are you currently employed?			☐ Yes ☐ No
May we contact your current emplo	yer?		☐ Yes ☐ No
Are you legally eligible to work in th Proof of employment eligibility will be			☐ Yes ☐ No
Date available to begin work	// Desired salary	y \$	
Are you currently on "lay-off" status	, subject to recall?		☐ Yes ☐ No
What is your availability to work:	Full Time Part Time (please indicate Mor Temporary (please indicate av		/)
Can you travel if a job requires it?			☐Yes ☐No
Do you have any relatives that are	currently employed by the Townsh	ip, to your knowledge?	□Yes □No
If yes, name & position:			
Have you ever been educated or w	orked under a different name?		☐Yes ☐ No
If yes, what name?			
Complete this section if drivapplying.	ving is an essential part of	the job for which ye	ou are
Do you have a valid driver's license	? ☐ Yes ☐ No		
State of Issuance: Lic	ense Number:		

upon an offer of employment by the Township.
Complete this section if the job for which you are applying requires that you possess a Commercial Driver's License:
Do you have a valid Commercial Driver's License? ☐ Yes ☐ No
Commercial Driver's License Number:
Have you tested positive or refused to test on any pre-employment drug or alcohol test administered by an employer to which you applied for, but did not obtain, safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules during the past two years?
Please sign to indicate your authorization for the Township to perform a record check of your Commercial Driver's License, upon an offer of employment by the Township.

Education and Training

	Name & Complete Address of School	Course of Study	# of Years Complete	Did you graduate?	Diploma or Degree (Please be specific)
High School				YES 🗆	
Undergraduate				YES 🗆	
Graduate				YES 🗆	
Technical, Other (please specify)				YES 🗆	
	cialized skills, training, apprentin involved with. (You can excludw.)				
	nal, trade, business or civic acti protected from discrimination by law		eld. (<i>You can e</i>	exclude members	thip that would indicate

Additional Information Please provide any additional job-related skills, specialized skills, qualification would like to provide that may be helpful to us in considering your application.	
DO <u>NOT</u> ANSWER THIS QUESTION UNLESS YOU HAVE BEEN I REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING COPY OF THE JOB DESCRIPTION.	
Can you perform the essential functions of the position, with or	without reasonable
accommodation?	Yes □ No □
Business References List below individuals who have knowledge of your character, experience and be business/work references. (Do NOT provide relatives, friends and those rapplication.) Please provide three. These references will be contacted after seriously considered for employment. If for some reason you do not have the indicate as such below.	mentioned elsewhere in this an interview, if you are being ree business/work references, please
1. Name, Complete Address & Telephone #	Relationship
2. Name, Complete Address & Telephone #	Relationship
3. Name, Complete Address & Telephone #	Relationship

Employment History

List below all organizations you have worked for, regardless of length of service. Include part-time as well as full-time employment and military experience. Record present or most recent employer first and continue in reverse chronological order. Do not omit any employer. If the HR Department for an employer is located at another site, please also provide that complete location address and telephone number. If the company has closed the location where you worked or if the company has been sold to another company, please provide a location where this employment can be verified. Attach additional pages if needed.

	End Date	Employer Name, Complete Address & Tele. Number
Start Date	End Date	Employer Name, Complete Address & Tele. Number
		Tele. #: (-
Job Title	Supervisor Name & Title	Tele. #: () - Nature of work performed/Job Responsibilities
Reason for leaving	Can we contact?	
	☐Yes ☐No	
Start Date	End Date	Employer Name Complete Address 9 Tolo Number
Start Date	End Date	Employer Name, <u>Complete Address</u> & Tele. Number
		Tele. #: () -
Job Title	Supervisor Name & Title	Tele. #: () - Nature of work performed/Job Responsibilities
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Reason for leaving	Can we contact?	
	☐Yes ☐No	
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	Supervisor Name & Title Can we contact?	
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Applicant's Statement

I certify that all information I have provided in this Employment Application is true and complete. I authorize the Township of Green Brook, its representatives, employees and agents to investigate all statements contained in this Employment Application as may be necessary in arriving at an employment decision. I also authorize the Township of Green Brook, its representatives, employees and agents to contact and obtain information from all references, employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby release the Township of Green Brook, its representatives, employees and agents from any liability for seeking, gathering and using such information in the employment process; I hereby release all other persons, corporations or organizations from any liability for furnishing such information about me.

I certify that the information provided herein is truthful and I further understand that the discovery of any misrepresentation, falsity or omission of fact in this application will result in the rejection of my employment application, or in the event of employment, provide cause for termination of employment.

I understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with the Township of Green Brook is at will which means that an employee can resign at any time and the Township of Green Brook may discharge an employee at any time with or without cause. Additionally, I understand that this Employment Application does not constitute an agreement or contract for employment for any specific period or definite duration. It is also understood that this "at will" employment relationship may not be changed by any written document, assurances to the contrary or implied oral or written agreements unless it is specifically acknowledged in writing by the Administrator of the Township of Green Brook.

This Employment Application will remain active for 90 days.

I understand that if employed by the Township of Green Brook, I must abide by all of its rules and regulations.

	Signature of Applicant	Date
	FOR PERSONNEL DEPARTMENT	USE ONLY
emarks:		