

## **EMPLOYMENT** APPLICATION

Borough of Sayreville 167 Main Street Sayreville, NJ 08872 732-390-7022

		/ )-			<b></b>		
		DATE:					
PERSONAL INFORMATION							
NAME:		SOCIAL SECURITY #:					
LAST	FIRST	MIDDI	LE INITIAL				
ADDRESS:							
STREET		CITY		STATE	ZIP CODE		
PHONE #:							
DAYTIME	CELL/OTHER						
ARE YOU 18 YEARS OR OLDER:	ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THIS COUNTRY?						
EMPLOYMENT DESIRED					•		
POSITION:	DATE YOU CAN	START:	SALARY DES	SIRED:	 _		
ARE YOU CURRENTLY EMPLOYED?	MAY WE CONTACT YOU CURRENT/PREVIOUS EMPLOYER?						
HAVE YOU APPLIED HERE BEFORE?	IF SO WHEN?						
• EDUCATION					•		
	NAME/LOCATION	# OF YEARS ATTENDED	DID YOU GRADUATE?	SUBJECT	'S STUDIED		

GRAMMAR SCHOOL

HIGH SCHOOL

COLLEGE

TRADE/TECHNICAL SCHOOL

## SPECIAL LICENSES, CERTIFICATES, SKILLS, SUPPLEMENTAL EDUCATION:

ACTIVITIES/HOBBIES:

U.S. MILITARY SERVICE:

RANK:

FORMER EMPLOYMENT	LIST LAST THREE EMPLOYERS STARTING WITH LAST ONE FIRST)				
1. DATES: FROM:	TO:				
EMPLOYER:		SUPERVISOR:			
ADDRESS:		PHONE #:			
JOB TITLE:	SALARY:	REASON FOR LEAVING:			
2. DATES: FROM:	TO:		•		
EMPLOYER:		SUPERVISOR:			
ADDRESS:		PHONE #:			
JOB TITLE:	SALARY:	REASON FOR LEAVING:			
3. DATES: FROM:	TO:				
EMPLOYER:		SUPERVISOR:			
ADDRESS:		PHONE #:			
JOB TITLE:	SALARY:	REASON FOR LEAVING:			
REFERENCES (GIVE THE NAI	MES OF THREE PERSONS NOT RELAT	IED TO YOU, WHOM YOU'VE KNOWN FOR AT LEAST ONE YEAR)			

1.)				
	NAME	OCCUPATION	CONTACT INFORMATION	YEARS ACQUAINTED
2.)				
-	NAME	OCCUPATION	CONTACT INFORMATION	YEARS ACQUAINTED
3.)				
	NAME	OCCUPATION	CONTACT INFORMATION	YEARS ACQUAINTED
•				

"I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED, AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME. IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE COMPANY'S RULES AND REGULATIONS. I UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY REPRESENTATIVE, OTHER THAN IT'S PRESIDENT, AND THEN ONLY IN WRITING AND SIGNED BY THE PRESIDENT, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING"