

DIRECTIONS FOR ONLINE EMPLOYMENT APPLICATION

- Click on **SIGN** (located on the top right hand corner of the screen)
- Click on **ADD TEXT** – fill in all areas that apply to you
- Once completed, click on PLACE SIGNATURE – A box will pop up for you to create your signature, enter your full name. Continue down to the signature line which is located on the last page of the application. Place your signature on the signature line.
- Click on **DONE SIGNING** – You will have the option to save your application. Choose the folder you would like your application saved in and file name.
- Attach your newly created file in an email addressed to employment@eastbrunswick.org. if you would prefer, you can drop your application off to the Human Resources office located in the East Brunswick Municipal Building or mail your completed application to:
 - East Brunswick Township
 - Human Resources
 - PO Box 1081
 - East Brunswick, NJ 08816

If you have any questions on how to fill out this application, please contact Human Resources at 732-390-6820



TOWNSHIP OF EAST BRUNSWICK
PO Box 1081
1 Jean Walling Civic Center Drive
East Brunswick, NJ 08816
PHONE: 732-390-6820
FAX: 732-390-3244
"An Equal Opportunity and ADA Employer"
APPLICATION FOR EMPLOYMENT

PLEASE COMPLETE AND PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

DATE _____

NAME _____
Last First Middle

PRESENT ADDRESS _____
Number Street City State Zip

HOW LONG _____

HOME PHONE _____ CELL PHONE _____

EMAIL ADDRESS _____

If under 18, please list age _____

POSITION APPLIED FOR (1) _____ (2) _____

Be Specific,
How many hours can you work weekly? _____
Can you work nights? _____

DAYS/HOURS available to work
No Pref _____ Thurs _____
Mon _____ Fri _____
Tue _____ Sat _____
Wed _____ Sun _____

Employment Desired FULL TIME ONLY PART TIME ONLY FULL OR PART TIME

When are you available for work? _____

Are you currently employed by the Township of East Brunswick? _____

If yes, what position title and department: _____

Have you previously been employed by the Township of East Brunswick? _____

If yes, please indicate department, dates and name of manager: _____

Do you have any relatives who are currently employed by the Township of East Brunswick? _____

If yes, please indicate name and department of relative: _____

Are you currently authorized to work in the United States? YES NO

Do you have a New Jersey Driver's License? YES NO

Operator Commercial (CDL) Class _____ Chauffeur

Have you had any accidents during the past three years? _____ How many? _____

Have you had any moving violations during the past three years? _____ How many? _____

<i>TYPE OF SCHOOL</i>	<i>NAME OF SCHOOL</i>	<i>LOCATION</i>	<i>NUMBER OF YEARS COMPLETED</i>	<i>MAJOR & DEGREE</i>
High School				
College				
Bus. or Trade School				
Professional School				

Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

Please list two references other than relatives or previous

Name _____ Name _____

Position _____ Position _____

Company _____ Company _____

Address _____ Address _____

Telephone _____ Telephone _____

MILITARY

Have you ever been in the Armed Forces YES NO

Are you now a member of the National Guard YES NO

Specialty _____ Date Entered _____ Discharge Date _____

WORK EXPERIENCE

Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of Employer _____

Name of Supervisor _____

Address _____

City, State, Zip _____

Phone Number _____

Reason for leaving (be specific) _____

Employment Dates

From

To

Job Title _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Name of Employer _____

Name of Supervisor _____

Address _____

City, State, Zip _____

Phone Number _____

Reason for leaving (be specific) _____

Employment Dates

From

To

Job Title _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Name of Employer _____

Name of Supervisor _____

Address _____

City, State, Zip _____

Phone Number _____

Reason for leaving (be specific) _____

Employment Dates

From

To

Job Title _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Name of Employer _____
 Name of Supervisor _____
 Address _____
 City, State, Zip _____
 Phone Number _____
 Reason for leaving (be specific) _____

<u>Employment Dates</u>	
From	
To	
Job Title	_____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

May we contact your present employer? YES NO
 Did you complete this application yourself? YES NO
 If not, who did? _____

AGREEMENT (PLEASE READ CAREFULLY BEFORE SIGNING)

I certify that all the information on this application is accurate and complete to the best of my knowledge and understand that misleading or false statements will constitute sufficient cause for refusal of hire or termination of my employment.

I understand that neither the acceptance of this application nor the subsequent entry into any type of employment relationship with the Township of East Brunswick creates an actual or implied contract of employment. I understand that, if I accept employment with the Township of East Brunswick, it will be on an at-will basis. This means that either the Township of East Brunswick or I have the right to terminate the employment relationship at any time, for any reason, with or without cause.

I authorize the Township of East Brunswick to investigate information concerning my education, employment experiences and all other aspects of my background relevant to my proposed employment. I release the Township of East Brunswick and its employees from all liability arising from such investigation.

Signature of Applicant _____ Date _____

VOLUNTARY DEMOGRAPHIC DATA

The voluntary information requested below is used to assist us in our compliance with Federal/State Equal Employment Opportunity record keeping and reporting. Your response is voluntary and will not be used in any way to determine your eligibility for employment.

Circle One:

Gender:	Male	Female	Not Disclosed
Race:	Asian/Pacific Islander	Hispanic	
	Black	White	
	Native American/Alaskan Native	Not Disclosed	