

TOWNSHIP OF FREEHOLD

PRE-EMPLOYMENT APPLICATION



In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, handicap or martial status.

Date of Application _____

Position(s) Applied For _____

Referral Source Advertisement Friend Relative
 Other

Name _____ Social Security No. _____
Last First M.

Address _____
Street City State Zip

Telephone No. _____

Have you filed an application or been employed here before? Yes No

If yes, list dates: _____

Are you a citizen of the United States or an alien lawfully permitted to work in the U.S.? Yes No

Are you available to work? Full Time Part Time

Are any of your friends or relatives employed by the Township of Freehold? Yes No

Are you on lay-off and subject to recall? Yes No

Drivers License Yes No

Commercial Driver's License Yes No Class Endorsement _____

Driver's License No. _____ State of Issue _____

Expiration Date _____

Freehold Township prohibits smoking in all Township Buildings, facilities as well as Township owned vehicles.

Do you have any mental, medical impairment or disability which might limit your ability to perform job-related duties?

Yes

No

If yes, please explain _____

Are you a Veteran? Yes

No

Serial No. _____

If yes, what branch of military service? _____ Rank _____

Have you ever been convicted of a felony? Yes

No

If yes, please explain _____

Please provide Name, Address, and Phone No. of three references not related to you.

_____	_____	_____
_____	_____	_____
_____	_____	_____

Education:

What is the highest year of school completed? _____

Describe specialized training, apprenticeship, skills and extracurricular activities. _____

Employment Experience

List each job held. Start with your present or most recent job.
Include military service assignments and volunteer activities.

1 Employer	Dates		Job Duties _____
	From	To	
	Hourly Rate / Salary		
	Starting	Final	
Address			
Job Title			
Supervisor			
Reason for Leaving			
2 Employer	Dates		Job Duties _____
	From	To	
	Hourly Rate / Salary		
	Starting	Final	
Address			
Job Title			
Supervisor			
Reason for Leaving			
3 Employer	Dates		Job Duties _____
	From	To	
	Hourly Rate / Salary		
	Starting	Final	
Address			
Job Title			
Supervisor			
Reason for Leaving			
4 Employer	Dates		Job Duties _____
	From	To	
	Hourly Rate / Salary		
	Starting	Final	
Address			
Job Title			
Supervisor			
Reason for Leaving			

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

Summarize special skills and qualifications acquired from previous employment or other experience.

AGREEMENT

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

I authorize you to make such investigations and inquiries of my personal, employment, financial or medical history and other related matters as may be necessary in arriving at employment decision. I hereby release employers, schools or persons in connection with my application.

In the event of my 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 Township of Freehold.

In consideration of my employment, I agree my employment and compensation can be terminated with or without cause and with or without notice at anytime at the option of Freehold Township or myself.

I also understand that a valid New Jersey Driver's License is a condition of employment with Freehold Township. Loss of driving privileges can result in termination of employment.

Signature of Applicant

Date