Borough of Harrington Park 85 Harriot Avenue, P. O. Box 174 Harrington Park, NJ 07640

Date:	
Date.	

Employment Application:

Applicant Information: Name (Last, First, Middle):	
Address:	
City/Town, State, Zip:	
Phone (Work): () (Home): ()	
Social Security Number:	
Position applied for: Have you ever applied to the Borough of Harrington Park before: YesNo If yes, give date: Date you can start: Salary desired: Are you available to work: Full time Part Time Shift Work Temporary Are you currently employed: Yes No May we contact you at work: Yes No May we contact your current employer: Yes No On you possess a current driver's license: Yes No On you possess a current driver's license: Yes No On you possess a current commercial driver's license: Yes No We are under eighteen years of age, can you provide proof of eligibility to work: Yes No We you legally eligible to work in the United States of America: Yes No We you ever plead guilty or been found guilty of a crime, disorderly persons offense, or nunicipal ordinance involving moral turpitude: Yes No Imployment is conditional upon the results of the criminal background check. An answer Yes' may disqualify you from employment depending upon the circumstances involved. Yes,'' please explain below.	a of

Employment History: This section must be completed even if you attach a resume. List your last four employers, major assignments within the same employer. Begin with the most recent. Include any military service. Explain any gaps in employment in the space on this form marked comments located on the bottom of this page.

Employer:	Date started:	Date left:	Work performed/ responsibilities:
Address:	<u> </u>		
Job Title:	Starting Salary:		
	Final Salary:	Final Salary:	
Reason for leaving:			
Supervisor's name and phone number			
May we contact for a reference: Ye	es No		
Employer:	Date started:	Date left:	Work performed/
			responsibilities:
Address:	Starting Salary:		
Job Title:			
	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:			
May we contact for a reference: Yes	s No		
Employer:	Date started:	Date left:	Work performed/
Address:			responsibilities:
Address:	Starting Salary:		
Job Title:			
	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:			
May we contact for a reference: Yes	sNo		
Employer:	Date started:	Date left:	Work performed/
Address:			responsibilities:
Address.	Starting Salary:		
Job Title:			
Dagaa fau laguing	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:			
May we contact for a reference: Yes	No		
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Comments:

References: Provide the names, addresses and phone numbers of three people whom we may contact as a reference. They should <u>not</u> be relatives or former supervisors.

Names & Address	Phone Number	Years Knov
Understandings and Agreements:		•
As an applicant for a position with the Borough that I must provide truthful and accurate inform		
my application may be rejected if any information		and the second s
hired, I understand that I may be separated from		
that information on this form was incomplete, u		1.5
Harrington Park the right to investigate the infor	mation I have provided, and t	talk with forme
employers (except where I have indicated they n		
the right to secure additional job-related informa		
Harrington Park and its representatives from all I understand that the Borough of Harrington Park		
not discriminate in its hiring practices. I understand		
accommodations as required by the Americans w	and the second s	
employed, I may resign at any time and that the	and the second s	
accordance with its established policies and proce		
may make any assurances to the contrary. I und be subject to job-related medical, physical, drug,		
that some positions may involve complete backgr		understand
unit some positions may involve complete backgi	ound and criminal cricator	
Applicant's Signature	Date	·
Conditions of Employment:		
Please be advised that all offers of employment a	re conditional on the applicar	it passing a
mandatory criminal background check and drug		
be required. Pursuant to our personnel policy, a		
consent form for drug testing, and if the test resu		
the legal use of prescription or non-prescription of	· - ·	
unless they can establish a legal basis for the use of they test positive.	or the arug or controlled subs	tance for which
For your application to be considered, you must sign	and date below.	
Applicant's Signature	Date	