

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

Date: _____

Employment Application:

Applicant Information: Name (Last, First, Middle): _____ Address: _____ City/Town, State, Zip: _____ Phone (Work): () _____ (Home): () _____ Social Security Number: _____ - _____ - _____
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Position applied for: _____

Have you ever applied to the Borough of Harrington Park before: Yes No

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

Are you currently on layoff status and subject to recall: Yes No

Do you possess a current driver's license: Yes No

Do you possess a current commercial driver's license: Yes No

Please list any endorsements: _____

If you are under eighteen years of age, can you provide proof of eligibility to work: Yes No

Are you legally eligible to work in the United States of America: Yes No

Pursuant to Federal Law, proof of U.S. Citizenship or immigrant status will be required if you are hired.

Have you ever plead guilty or been found guilty of a crime, disorderly persons offense, or a municipal ordinance involving moral turpitude: Yes No

Employment is conditional upon the results of the criminal background check. An answer of "Yes" may disqualify you from employment depending upon the circumstances involved. If "Yes," please explain below.

The Borough of Harrington Park is an Equal Opportunity Employer M/F

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:	Starting Salary:		
Job Title:	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:			
May we contact for a reference: Yes 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 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 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 No			

Comments:

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

Names & Address	Phone Number	Years Known

Understandings and Agreements:

As an applicant for a position with the Borough of Harrington Park, I understand and agree that I must provide truthful and accurate information in this application. I understand that my application may be rejected if any information is not complete, true, and accurate. If hired, I understand that I may be separated from employment if the Borough later discovers that information on this form was incomplete, untrue, or inaccurate. I give the Borough of Harrington Park the right to investigate the information I have provided, and talk with former employers (except where I have indicated they may not be contacted). I give the Borough the right to secure additional job-related information about me. I release the Borough of Harrington Park and its representatives from all liability for seeking such information. I understand that the Borough of Harrington Park is an equal-opportunity employer and does not discriminate in its hiring practices. I understand that the Borough will make reasonable accommodations as required by the Americans with Disabilities Act. I understand that, if employed, I may resign at any time and that the Borough may terminate me at any time in accordance with its established policies and procedures. No representatives of the Borough may make any assurances to the contrary. I understand that any offer of employment may be subject to job-related medical, physical, drug, or psychological tests. I also understand that some positions may involve complete background and criminal checks.

Applicant's Signature _____ Date _____

Conditions of Employment:

Please be advised that all offers of employment are conditional on the applicant passing a mandatory criminal background check and drug test. A pre-employment physical may also be required. Pursuant to our personnel policy, all job applicants are required to sign a consent form for drug testing, and if the test results are positive and are not accounted for by the legal use of prescription or non-prescription drugs the applicant shall be ineligible for hire unless they can establish a legal basis for the use of the drug or controlled substance for which they test positive.

For your application to be considered, you must sign and date below.

Applicant's Signature _____ Date _____