

APPLICATION FOR EMPLOYMENT

THE BOROUGH OF ROSELLE PARK
 110 East Westfield Avenue
 Roselle Park, New Jersey 07204

PERSONAL INFORMATION:

Name: _____
LAST FIRST MIDDLE

Permanent Address: _____
STREET CITY STATE ZIP PRIMARY PHONE NUMBER

Mailing Address: _____
STREET CITY STATE ZIP SOCIAL SECURITY NUMBER

Are you a Citizen of the United States? YES or NO *If NO: Registration Number:* _____

Are you related to anyone currently employed by the Borough? YES or NO

If YES: State name of individual and Department: _____
FULL NAME DEPARTMENT

EMPLOYMENT DESIRED: Full-Time Part-Time Temporary / Seasonal

Desired Position: _____ Date You Can Start: _____ Desired Salary: \$ _____

Are you currently employed? YES or NO _____ *If YES; can we inquire with your employer?* YES or NO _____

Have you ever applied with the Borough of Roselle Park before? *If YES; when and for what position?*

EDUCATION	Name & Location	Did you Graduate? (Y/N)	Degree Attained	Course of Study
High School	_____	_____	_____	_____
College	_____	_____	_____	_____
Trade, Business, Other	_____	_____	_____	_____
Other Qualifications: _____				
United States Military Service (Include service dates, rank, and current assignment if applicable): _____ _____				

If you have been convicted of any offense, other than a parking violations, please describe
 (Note: A conviction will not necessarily disqualify the applicant from employment): _____

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FORMER EMPLOYERS *(List below last four employers, starting with most recent first)*

Date Range		Name and Address	Salary	Position	Reason for Leaving
FROM	TO				

REFERENCES *(Provide the names of three persons not related to you, whom you have known at least one year)*

NOTICE: The Borough of Roselle Park will not accept current members of the governing body, Borough Department Heads, or other Borough employees as references for employment. Should this application include these individuals it may disqualify you from consideration *(Ref. Borough Resolution 281-17)*.

1.	Name	Address	Business or Occupation	Years Acquainted
2.				
3.				

PHYSICAL RECORD

Do you have any physical, mental, or medical impairment which will interfere with your ability to perform the essential functions of the job for which you are applying as provided in the job description as advertised and reviewed? YES or NO

If YES; please explain: _____

STATEMENT OF AUTHORIZATION & UNDERSTANDING

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause of dismissal. Further, I understand and agree that my employment is at will and for no definite period and may, regardless of the day of payment of my wages and salary, be terminated at any time with or without cause unless otherwise agreed in writing.

 Signature Date

**NOTICE TO APPLICANT
 OPTIONAL AA / EEO INFORMATION**

Please assist the Borough of Roselle Park in complying with governmental Equal Employment Opportunity and Affirmative Action guidelines by checking the appropriate box below. Disclosure of this information to the Borough is voluntary and will be held in strict confidentiality.

<input type="checkbox"/>	African American
<input type="checkbox"/>	White (Non-Hispanic)
<input type="checkbox"/>	Hispanic
<input type="checkbox"/>	Asian or Pacific Islander (Including Indian)
<input type="checkbox"/>	Native American