## Borough of Cape May Point 215 Lighthouse Ave., Po Box 490 Cape May Point, NJ 08212

## **EMPLOYMENT APPLICATION**

(Rev. 1/2015)

Applicant Information:	Date applied:
Address:	
City/10Wn:	(Home): ( )
	(Home): ( )
Social Security Number:	
Position applied for:	
Have you ever applied to the Borough of Call If yes, give date	pe May Point before: YesNo
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:No
May we contact your current employer:	_ YesNo
Are you currently on layoff status and subject	ct to recall:YesNo
Do you possess a current driver's license:	Yes No
Do you possess a current commercial driver	's license: No
Please list any endorsements:	
If you are under eighteen years of age, can y	ou provide proof of eligibility to work: YesNo
Are you legally eligible to work in the United Pursuant to Federal Law, proof of US Citizenship	l States of America:Yes No p or immigration status will be required if you are hired.

**Employment History:** This section may be completed in lieu of 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:			responsibilities.
T 1 (2014)	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:			responsibilities:
	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/
Address:			responsibilities:
Address:	Starting Salary:		1
Job Title:	Final Salary:		
Reason for leaving:			•
Supervisor's name and phone number:			
May we contact for a reference:Yes	No		
Employer:	_No	Date left:	Work performed/
Zimpioyer:	Dute Startea.	Dute left.	responsibilities:
Address:	Starting Salary:		-
Job Title:	Starting Salary.		
000 11111	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:			-
May we contact for a reference:Yes	_No		

**Education:** Provide information on your formal schooling and education. Include elementary, secondary, and post-secondary education, if any. Include any formal vocational or professional education. For high school and post-secondary education, indicate any major or specialty, such as Academic, Business, or Trade.

School:	Years completed: (Circle)	Graduated: (Circle)	Major Field:
High:	1 2 3 4	Yes No	
College:	1 2 3 4	Yes No	
Other:	1 2 3 4	Yes No	

Languages: List any foreign languages you know and indicate your level of proficiency.

Language:	Speak Some:	Speak Fluently:	Read:	Write:

## **Military Experience:**

ve you ever served in the U.S. Armed Forces? YES NO
/es, what Branch? Rank at discharge:
scribe any training received which may be relevant to the position for which you are olying:
pecial Skills & Experience: State any special skills, experience, training, licenses, rtifications or other factors that make you especially qualified for the position for which you are oplying.
omments & Additional Information: Is there any additional information about you e should consider?
Rank at discharge: scribe any training received which may be relevant to the position for which you are oblying:  pecial Skills & Experience: State any special skills, experience, training, license retifications or other factors that make you especially qualified for the position for which you a oplying.  comments & Additional Information: Is there any additional information about you

**References:** Provide the names, addresses and phone numbers of three people whom we may contact as a reference. They should  $\underline{not}$  be relatives.

Name & Address:	Phone Number:	Years Known:		
Understandings and Agreements:  As an applicant for a position with the Borough of Cape May Point, 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 Cape May Point the right to investigate the information I have provided, 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 and its representatives from all liability for seeking such information. I understand that the Borough of Cape May Point 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 and subject to collective bargaining agreements. 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. For your application to be considered, you must sign and date below.				
Applicant's Signature	Date			
This section for Develop of Cone May Daint was soll-				
This section for Borough of Cape May Point use only Results of interview				
Interviewer:				
Date: Time:				
Pagammandad for Hira: VFS				