

Borough of Paramus
1 Jockish Square, Paramus, New Jersey 07652

www.paramusborough.org

Application for Employment

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application's used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

Position applied for * : _____

*We only accept applications for positions that are being advertised

Last name: _____ First name _____ Date: _____

Address _____ City: _____ State _____ Zip code _____

Telephone #: _____ Social Security #: _____

Type of employment desired: full-time _____ part-time _____ temporary/seasonal _____

Date you will be available to start work: _____

Do you have any objection to working overtime if necessary? _____ Yes _____ No

Can you travel if required by this position? _____ Yes _____ No

Have you ever been previously employed by our organization? _____ Yes _____ No

Can you submit proof of legal employment authorization and identity? _____ Yes _____ No

If you are under 18, can you furnish a work permit if it is required? _____ Yes _____ No

Have you ever been convicted of a crime? _____ Yes _____ No

If yes, please explain (a conviction will not automatically bar employment): _____

Drivers license number : _____ CDL endorsement: yes ___ no ___ Class _____

How were you referred to us? _____

Employment History

Please provide all employment information for your past three employers starting with the most recent.

Employer: _____ **Position held:** _____

Address: _____ **Telephone #:** _____

Immediate supervisor and title: _____

Dates employed: from _____ to _____ **Salary:** _____

Job summary: _____

Reason for leaving: _____

Employer: _____ **Position held:** _____

Address: _____ **Telephone #:** _____

Immediate supervisor and title: _____

Dates employed: from _____ to _____ **Salary:** _____

Job summary: _____

Reason for leaving: _____

Employer: _____ **Position held:** _____

Address: _____ **Telephone #:** _____

Immediate supervisor and title: _____

Dates employed: from _____ to _____ **Salary:** _____

Job summary: _____

Reason for leaving: _____

Computer skills: List software/programs and level of proficiency

Typing – words per minute: _____

Other Skills and Qualifications

Summarize any job-related training, skills, licenses, certificates, and/or other qualifications:

Language(s): Other than English

Reading & Writing (Circle One)

Verbal (Circle One)

Basic Proficient Fluent

Basic Proficient Fluent

Basic Proficient Fluent

Basic Proficient Fluent

Educational History

List school name and location, years completed, course of study, and any degrees earned:

High school: _____

College: _____

Technical Training: _____

Other: _____

References (must be supplied)

List 3 references names, telephone numbers, and years known (do not include relatives or employers):

I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that persons need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

In order for this application to be considered, it must be completely filled out. An incomplete application will not be considered for the position applied for.

Please note that if the position has an application closing date, applications submitted after the designated closing date will not be considered.

Please note that our application files are purged on December 31st of each year.

Applicant's signature _____ Date _____