

Application for Employment

Recreation Department



Please Print

Equal access to programs, services and employment is available to all persons. Applicants requiring reasonable accommodation to the application and/or interview process should notify the Recreation Department office.

Date of Application ___/___/___

Position(s) applied for Summer Rec. Other
Referral Source Advertisement Employee Relative Government Employment Agency
 Walk-in Private Employment Agency Other _____

Name of source (if applicable) _____

Name _____
Last First Middle

Address _____
Street City State Zip Code

Social Security #: _____ Email address: _____

Telephone # ('s) H) _____ C) _____

If necessary, the best time to call you at home is? _____:____ a.m. p.m.

Emergency Contact Name: _____ Emergency Contact Relation: _____

Emergency Contact Cell: () _____

If you are under 18, can you furnish the required work permit? _____ yes no

If no please explain _____

Have you submitted an application here before? _____ yes no

If yes give dates(s) _____ From ___/___/___ To ___/___/___

Are you legally eligible for employment in this country? _____ yes no

Date available for work ___/___/___ Adult T-shirt size _____

Type of employment desired _____ Full – Time Part – Time Seasonal Temporary Educational: Co-Op / Intern

Are you able to meet the attendance & active requirements of the position? _____ yes no

Will you work overtime if required? _____ yes no

If no, please explain _____

Have you ever been bonded? _____ yes no

Have you ever been convicted of a crime? _____ yes no

If yes, please explain _____

Conviction will not necessarily be a bar to employment. Each instance and explanation will be considered in relation to the position for which you are applying.

Employment History

Provide the following information for your past and current employers, assignments or volunteer activities, starting with the most recent (use additional sheets if necessary).

EMPLOYER Telephone	<u>Dates</u> From	<u>Employed</u> To	Summarize the type of work performed and job responsibilities
ADDRESS			
JOB TITLE			
IMMEDIATE SUPERVISOR'S NAME AND TITLE			
REASON FOR LEAVING			
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER			

EMPLOYER Telephone	<u>Dates</u> From	<u>Employed</u> To	Summarize the type of work performed and job responsibilities
ADDRESS			
JOB TITLE			
IMMEDIATE SUPERVISOR'S NAME AND TITLE			
REASON FOR LEAVING			
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER			

EMPLOYER Telephone	<u>Dates</u> From	<u>Employed</u> To	Summarize the type of work performed and job responsibilities
ADDRESS			
JOB TITLE			
IMMEDIATE SUPERVISOR'S NAME AND TITLE			
REASON FOR LEAVING			
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER			

COMMENTS – Including explanation of any gaps in employment _____

SKILLS AND QUALIFICATIONS – Summarize any special training, skills, licenses and / or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying _____

Educational Background if job related

A. List last three (3) schools attended, starting with most recent. B. List the number of years completed. C. Indicate degree or diploma earned, if any. D. Grade Point Average or Class Rank E. Major field of study. F. Minor field of study (if applicable).

A. SCHOOL	B. YEARS COMPLETED	C. DEGREE/DIPLOMA	D. GPA/RANK	E. MAJOR	F. MINOR

References

List names and telephone numbers of three business/work references who are **not** related to you and who are **not** previous supervisors. If not applicable, list three school or personal references who are **not** related to you.

NAME	TELEPHONE NUMBER	YEARS KNOWN
	()	
	()	
	()	

Additional Information

List professional trade, business or civic associations and any offices held. Exclude memberships that would reveal sex, race, religion, national origin, age, color, disability or any other similarly protected status.

ORGANIZATION	OFFICE(S) HELD

List special accomplishments, publications, awards, etc. Exclude information that would reveal sex, race, religion, national origin, age, color, disability or any other similarly protected status. _____

List any additional information you would like us to consider. _____



I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from Neptune Township, whenever it is discovered.

I give Neptune Township the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability Neptune Township and its representatives for seeking, gathering and using such information and all other persons, corporations or organizations for furnishing such information.

Neptune Township does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state or federal law.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of Neptune Township has the authority to make any assurances to the contrary.

I understand and agree that if my employment is for either a seasonal, temporary or part-time position, that there are certain employee benefits for which I am not eligible. By way of example, the benefits not provided include, but are not limited to, vacation, sick leave, health benefits, and participation in grievance procedures.

I also understand if I am hired, I will be required to provide proof of identity and legal work authorization and, if job related, provide a valid driver's license.

Since I will be working with children, I understand that before I am hired, I will be required to undergo a Criminal Background Check as per Neptune Township Ordinance 05-32.

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

Signature of Applicant _____ Date ____ / ____ / ____