Town of Kearny
402 Kearny Avenue, Kearny, NJ 07032
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. For employment with the Town of Kearny, you must reside in Hudson or Essex County.

Out of county residents not eligible for employment.

| Position applied for or type of work | desired: | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|--------------------------------------------------|--------------------|----------------------|--|
| Applicant name: | | | | | |
| Address | | City: | State | Zip code_ | |
| Telephone #: | | _Social Security #: | | | |
| Type of employment desired: ful | l-time | part-time | temporary/seasonal | | |
| Date you will be available to start wo | ork: | | | | |
| Are you able to meet the attendance of Do you have any objection to working Can you travel if required by this post Have you ever been previously empl | ng overtime if sition? | f necessary? | Yes | No No No No | |
| Can you submit proof of legal emplo If you are under 18, can you furnish a Have you ever been convicted of a ca If yes, please explain (a conviction w | yment author a work permi rime? | rization and identity? t if it is required? | Yes Yes Yes | No No No | |
| Drivers license number : | | CDL endorse | ment: yes r | no Class | |
| How were you referred to us? | | | | | |
| Please provide all employment inform | | Employment History our past three employers star | ting with the mo | ost recent. | |
| Employer: | | Position held | l: | | |
| Address: | Telephone #: | | | | |
| Immediate supervisor and title: | | | | | |
| Dates employed: from | to | Salary: | | | |
| Job summary: | | | | | |
| Reason for leaving: | | | | | |
| Employer: | | | | | |
| | Telephone #: | | | | |
| Immediate supervisor and title: | | | | | |
| Dates employed: from | | | | | |
| Job summary: | | | | | |
| Reason for leaving | | | | | |
| Applicant's signature | | | Date | | |

| Address: | | | | | | | |
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| | | | | Telephone #: | · · | | |
| Immediate supervisor an | d title: | | | | | | |
| Dates employed: from | | to | S | Salary: | | | |
| Job summary: | | | | | | | |
| Reason for leaving: | | | | | | | |
| Computer skills: List s | | | | | | | |
| Typing – words per mi | | | | | | | _ |
| Other Skills and Qualif Summarize any job-relat | | ills, licenses | , certificates, and | l/or other qu | alifications: | | _ |
| Language(s): | Reading | g & Writing | g (Circle One) | V | erbal (Circ | le One) | _ |
| | Basic | Proficient | Fluent | Basic | Proficient | Fluent | |
| | Basic | Proficient | Fluent | Basic | Proficient | Fluent | |
| List school name and loc High school: | | | | | | | |
| High school: College: Technical Training: Other: | | | | | | | |
| High school: College: Technical Training: | ıpplied) | | | | | | |
| High school: College: Technical Training: Other: References (must be su | ipplied) telephone nun | nbers, and ye | ears known (do n | ot include re | elatives or en | nployers): | |
| High school: | npplied) telephone num nployer to contact, of I also hereby release all other persons or of tation or material or in employed, whenever that there is no specification of specif | obtain, and verify e from liability to organizations for mission made by ver it may be disc ified length of er | ears known (do not the accuracy of information the potential employer are providing such information me on this application covered. | ot include re | in this application tives for seeking trause for cancel s not constitute as | nployers): n from all previous er, gathering, and using lation of this applicat | mployers, educa- s such information to ion or immediate |
| High school: College: Technical Training: Other: References (must be su List 3 references names, I hereby authorize the potential er tional institutions, and references. make employment decisions and a I understand that any misrepresen termination of employment if I an If I am employed, I acknowledge | ipplied) telephone num imployer to contact, of I also hereby release all other persons or a tation or material or in employed, whenever that there is no specified by the content of this organization in tion as required by the loyed, I will be required time shall results. | obtain, and verify e from liability to organizations for mission made by ver it may be discified length of er he relationship at ot to refuse to his the ADA. hired to provide soult in immediate | ears known (do not the accuracy of informing the potential employer approviding such informing on this application covered. In a providing such informing the informing such informing the information of idea termination of employer at information of employer. | nation contained and its representation. will be sufficien as application doe ause, at any time inate against a quitity and legal woment. | in this application tives for seeking trause for cancel s not constitute as to so long as there walified individuators authorization | nployers): In from all previous et a gathering, and using lation of this applicate in agreement or contrais no violation of application of application of application with a disability because within three days of | mployers, educa- such information to ion or immediate act for employment. olicable federal or cause of that persons |
| College: | ipplied) telephone num imployer to contact, or I also hereby release all other persons or a tation or material or in employed, whenever that there is no specified by the contact of this organization in tion as required by the loyed, I will be required time shall receive read and fully under | obtain, and verify e from liability to organizations for mission made by ver it may be disc ified length of en er relationship at ot to refuse to his the ADA. irred to provide s sult in immediate erstand the forege | ears known (do not the accuracy of information the potential employer as providing such information entered. In the accuracy of information the potential employer as providing such information entered. In the accuracy of information that this will, with or without core or otherwise discrimation attisfactory proof of idea termination of employoing, and that I seek entered the accuracy of the ac | ot include re- nation contained und its representa ation. will be sufficien s application doe ause, at any time inate against a q ntity and legal w ment. uployment under | in this application tives for seeking. It cause for cancel as not constitute as so long as there walified individual tork authorization these conditions. | nployers): n from all previous en gathering, and using lation of this applicate in agreement or contrais no violation of application of application with a disability because within three days of | mployers, educa- such information to ion or immediate act for employment. olicable federal or cause of that persons being hired. Failure |
| High school: | ipplied) telephone num imployer to contact, of I also hereby release all other persons or of tation or material or in employed, wheneve that there is no specure can terminate the first organization in tion as required by the loyed, I will be required time shall reserve and fully under the read and fully under the to be consider. | obtain, and verify e from liability to organizations for mission made by ver it may be discified length of ene relationship at ot to refuse to his the ADA. Sired to provide soult in immediate erstand the foregreed, it must be obtained to provide soult in immediate or the restand the foregreed, it must be obtained to provide soult in immediate or the foregreed, it must be obtained to provide soult in immediate or the foregreed, it must be obtained to provide soult in immediate or the foregreed, it must be obtained to be obtain | ears known (do not the accuracy of informing the potential employer approviding such informing on this application covered. In a many such informing the control of the end of the termination of employing, and that I seek end to completely filled. | nation contained and its representation. will be sufficien as application doe ause, at any time inate against a quitity and legal warment. apployment under the court. An incomposite of the court is a property of the court. | in this application atives for seeking trause for cancel as not constitute as so long as there walified individual tork authorization these conditions. | nployers): In from all previous en gathering, and using lation of this applicate in agreement or contrais no violation of application with a disability because within three days of a | mployers, educa- such information to ion or immediate act for employment. olicable federal or cause of that persons being hired. Failure |

Date

Applicant's signature

Town of Kearny Applicant Background and Referral Information Form

Note:

This information on this form is used solely for aggregate statistical purposes. No information on this form is used in any decision regarding hiring, promotion, or terms and conditions of employment. **<u>DO NOT</u>** write your name or any other personal identification on this form.

The Town of Kearny is an Equal Employment Opportunity Employer

| 1. | Position for which applied: |
|----|-----------------------------------------------------------------------------------------------------------------------------------|
| 2. | Please identify your ethnic/racial background: |
| | Black |
| | White |
| | Hispanic |
| | Asian-American |
| | American Indian |
| | Other |
| 3. | How did you learn of the job opening for which you applied. (Check all that apply and provide specifics to the extent you recall) |
| | Newspaper advertisement. Newspapers: |
| | Radio Advertisement. Station: |
| | Recruiting Agency. Which |
| | Poster Where seen: |
| | School, Church or other source. Specify: |
| | Friend or Relative |