

Town of Kearny 402 Kearny Avenue, Kearny, NJ 07032 www.kearnynj.org

Application for Employment

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is 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 accommodations to the application and/or interview process should notify a representative of the organization.

*To be eligible for employment with the Town of Kearny, the following residential preference will apply: Residents of: 1) Town of Kearny & City of Newark 2) Hudson & Essex Counties 3) State of NJ 4) Outside the State

Position applied for: * Social Service Aide		Date:				
* Applications are only accepted for position	_					
Last name:	First	t name:				
Address:		State, Zip				
Telephone #: Home	none #: Cell					
Social security # - last 4 digits:		email address:				
Employment type:X Part time only	Date a	vailable:				
Do you have any objection to working Do you have any objection to working Have you ever been previously employ If you are under 18, can you furnish a Have you ever been convicted of a crit If yes, please explain (a conviction wi	nights or weekends? yed by our organizati work permit if requir me?	Yes				
How were you referred to us?						
Please provide all employment inform	Employment Hist nation for your past three	ee (3) employers starting with the most recent.				
Employer:		Position held:				
Address:		7D 1 1 //				
Immediate supervisor and title:		_				
Dates employed: From:		Salary:				
Reason for leaving:						
Employer:		Position held:				
Address:						
Immediate supervisor and title:						
Dates employed: From:	to From:	Salary:				
Reason for leaving:						
Applicant's signature						

	Employment History Continued						
Employer:				Positio	n held:		
Address:		Position held: Telephone #:					
Immediate sup	ervisor and title:				•		
Dates employed	d: From:		to From:			Salary:	
	ving:						
			Skills				
Computer: List	t all software/prog	grams and level	of proficiency:				
Typing: words	per minute						
Other skills and	d qualifications:	Summarize any	job related train	ning, skills, lic	enses, certific	eates and/or other	r qualifications
Language (s):		Read	ling & writing (c	heck one)		Verbal (check o	ne)
	English	Basic	Proficient	Fluent	Basic	Proficient	Fluent
	Spanish	Basic	Proficient	Fluent	Basic	Proficient	Fluent
	Portuguese	Basic	Proficient	Fluent	Basic	Proficient	Fluent
			Educati	on			
High school: College:		•					
List thre	ee (3) references:		ferences (must e number and ye	* *	o not include	relatives or emp	loyers)
T. h		44 -14 1	······································	·		4i f11i	
tional institutions and make employment de made by me on this a may be discovered. If tract for employment, applicable federal or a disability because the satisfactory proof of	e potential employer to differences. I also herelecisions and all other perapplication will be sufficed f I am employed, I acknowledge. Accordingly, either I constate law. I understand that persons need for a residentity and legal workers of employment. I report of the state in the sum of employment. I report of the sum of employment.	by release from liabilersons or organization cient cause for cance owledge that there is or the employer can that it is in the policy easonable accommodat authorization with	ity the potential emplois for providing such llation of this application of specified length of the reminate the relationshy of this organization is lation as required by the three (3) days of being the provided in the pro	yer and its represer information. I ur on or immediate te employment and the part will, with or vot to refuse to hire e ADA. I also und g hired. Failure to	ntatives for seeking derstand that any ermination of empl hat this application without cause, at ar or otherwise discri derstand that if I are submit such proo	g, gathering and using s misrepresentations or oyment if I am employ does not constitute an ny time, so long as ther minate against a qualif m employed, I will be of within the required	such information to material omissions yed, or whenever it agreement or con- re is no violation of fied individual with required to provide time shall result in
	pplication to be con Please note that it			ing date, applica			
Applicant's sign	nature			Da	ate		



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

The Town of Kearny is an Equal Employment Opportunity Employer.

Position applied for:				
Please identify your ethnic/racial background:				
	Black			
	White			
	Hispanic			
	Asian			
	American Indian			
	Other			
How did you learn of the job opening. Check all that apply and provide specific to the extend you recall				
Newspaper ad. Which newspaper	per:			
Unemployment Office. Which	Unemployment Office. Which location:			
Community College. Which co	Community College:			
One Stop career center. Which	One Stop career center. Which location:			
Urban League. Which location	Urban League. Which location.			
County Work Force office. W	County Work Force office. Which location:			
	Goodwill Industries. Which location.			
Web site. Which web site:	Web site. Which web site:			
NJ League of Municipalities				
Friend / Other. Please specify:	Friend / Other. Please specify:			
Poster in municipal building				