

# BOROUGH OF METUCHEN

500 MAIN STREET  
METUCHEN, NJ 08840



Qualified applicants are considered for all positions without regard to race, color, religion, sex, sexual orientation, national origin, age, marital or veteran status, the presence of non-job related medical condition or disability, or any other characteristic protected under federal, state, or local law.

## Name and Address

First Name:	MI:	Last Name:
Mailing Address:		
City, State, and Zip Code:		
Phone (home):	Phone (cell):	
Email:	Date:	

## Job Type

Position Applying for:			
Date you can start:		Salary Desired:	
Are you available to work...	Full-time	Part-time	Seasonal

## Additional Information

Have you ever been employed by this organization in the past?	Yes	No
Are you legally eligible for employment in this country? (Proof of U.S. Citizenship or Immigration status will be required upon employment)	Yes	No
Are you currently on "lay-off" status and subject to recall?	Yes	No
Do you have a valid N.J. Driver's License?	Yes	No
Do you have a CDL License?	Yes	No
Are you related to any Borough of Metuchen Employees?	Yes	No
If yes, who?	Relationship:	

Education				
School	Location (mailing address)	Years Completed	Major	Degree or Diploma
High School				
College or Business / Trade School				
Military				
Have you ever been in the Armed Forces?	Yes	No	Date Entered	
Are you now a member of the National Guard?	Yes	No	Discharge Date	
Specialty				

### Work Experience

***Please list ALL work experience beginning with your most recent job held. Attach additional sheets, if necessary.***

Company	Name of last supervisor	Hrs/week
Address	Start Date	Starting Salary
City, State, and Zip Code	End Date	Final Salary
Phone Number	Your last job title	
Reason for leaving (be specific)		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.		
May we contact this employer?      Yes      No		

Company	Name of last supervisor	Hrs/week
Address	Start Date	Starting Salary
City, State, and Zip Code	End Date	Final Salary
Phone Number	Your last job title	
Reason for leaving (be specific)		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.		
May we contact this employer?      Yes      No		

Work Experience (continued)		
Company	Name of last supervisor	Hrs/week
Address	Start Date	Starting Salary
City, State, and Zip Code	End Date	Final Salary
Phone Number	Your last job title	
Reason for leaving (be specific)		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.		
May we contact this employer?      Yes      No		
Work Experience (continued)		
Company	Name of last supervisor	Hrs/week
Address	Start Date	Starting Salary
City, State, and Zip Code	End Date	Final Salary
Phone Number	Your last job title	
Reason for leaving (be specific)		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.		
May we contact this employer?      Yes      No		

Work Experience (continued)		
Company	Name of last supervisor	Hrs/week
Address	Start Date	Starting Salary
City, State, and Zip Code	End Date	Final Salary
Phone Number	Your last job title	
Reason for leaving (be specific)		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.		
May we contact this employer?      Yes      No		
References		
<i>Please include name, phone number, and circumstances of your acquaintance. Exclude relatives and former employers.</i>		
1.		
2.		
3.		
4.		

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for my employment as may be necessary in arriving at an employment decision. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand that my employment is contingent upon a satisfactory physical examination which may include a drug screening and the successful completion of the probation period.

In consideration of my employment, I agree that my employment and compensation could be terminated with or without cause and with or without notice at any time, at the option of either the employer or myself. It is expressly understood that my employment with the Borough of Metuchen is at will.

Date:

Signature: