

# Borough of Atlantic Highlands Employment Application

Date: \_\_\_\_\_

## Applicant Information:

Name (Last, First, Middle): \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (Work): ( ) \_\_\_\_\_ (Home): ( ) \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Position applied for: \_\_\_\_\_

Have you ever applied to the Borough before: \_\_\_ Yes \_\_\_ No If yes, give date: \_\_\_\_\_

Date you can start: \_\_\_\_\_ Salary desired: \_\_\_\_\_

Are you available to work: \_\_\_ Full time \_\_\_ Part time \_\_\_ Shift work \_\_\_ Temporary

Are you currently employed: \_\_\_ Yes \_\_\_ No May we contact you at work: \_\_\_ Yes \_\_\_ No

May we contact your current employer: \_\_\_ Yes \_\_\_ No

Are you currently on layoff status and subject to recall: \_\_\_ Yes \_\_\_ No

Do you possess a current driver's license: \_\_\_ Yes \_\_\_ No

Do you possess a current commercial driver's license: \_\_\_ Yes \_\_\_ No

Please list any driver's license endorsements: \_\_\_\_\_

If you are under eighteen years of age, can you provide proof of eligibility to work: \_\_\_ Yes \_\_\_ No

Are you legally eligible to work in the United States of America: \_\_\_ Yes \_\_\_ No

Pursuant to Federal Law, proof of US Citizenship or immigration status will be required if you are hired.

The Borough of Atlantic Highlands is an Equal Opportunity Employer

**Employment History:** This section must be completed even if you attach a resume. List your last four employers, major assignments within the same employer. Begin with the most recent. Include any military service. Explain any gaps in employment in the space on this form marked comments located on the bottom of this page.

Employer:	Date started:	Date left:	Work performed/ responsibilities:
Address:	Starting Salary:		
Job Title:	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:			
May we contact for a reference: ___ Yes ___ No			
Employer:	Date started:	Date left:	Work performed/ responsibilities:
Address:	Starting Salary:		
Job Title:	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:			
May we contact for a reference: ___ Yes ___ No			
Employer:	Date started:	Date left:	Work performed/ responsibilities:
Address:	Starting Salary:		
Job Title:	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:			
May we contact for a reference: ___ Yes ___ No			
Employer:	Date started:	Date left:	Work performed/ responsibilities:
Address:	Starting Salary:		
Job Title:	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:			
May we contact for a reference: ___ Yes ___ No			

**Comments:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Education:** Provide information on your formal schooling and education. Include elementary, secondary, and post-secondary education, if any. Include any formal vocational or professional education. For high school and post-secondary education, indicate any major or specialty, such as Academic, Business, or Trade.

School:	Years completed: (Circle)	Graduated: (Circle)	Major Field:
Elementary:	5 6 7 8	Yes No	N/A
High:	1 2 3 4	Yes No	
College:	1 2 3 4	Yes No	
Other:	1 2 3 4	Yes No	

**Languages:** List any foreign languages you know and indicate your level of proficiency.

Language:	Speak Some:	Speak Fluently:	Read:	Write:

**Special Skills & Experience:** State any special skills, experience, training, licenses, certifications or other factors that make you especially qualified for the position for which you are applying.

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**Comments & Additional Information:** Is there any additional information about you we should consider?

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**References:** Provide the names, addresses and phone numbers of three people whom we may contact as a reference. They should not be relatives or former supervisors.

Name & Address:	Phone Number:	Years Known:

**Understandings and Agreements:**

As an applicant for a position with the Borough of Municipal Name, I understand and agree that I must provide truthful and accurate information in this application. I understand that my application may be rejected if any information is not complete, true and accurate. If hired, I understand that I may be separated from employment if the Borough of Municipal Name later discovers that information on this form was incomplete, untrue, or inaccurate. I give the Borough of Municipal Name the right to investigate the information I have provided, talk with former employers (except where I have indicated they may not be contacted). I give the Borough of Municipal Name the right to secure additional job-related information about me. I release the Borough of Municipal Name and its representatives from all liability for seeking such information. I understand that the Borough of Municipal Name is an equal-opportunity employer and does not discriminate in its hiring practices. I understand that the Borough of Municipal Name will make reasonable accommodations as required by the Americans with Disabilities Act. I understand that, if employed, I may resign at any time and that the Borough of Municipal Name may terminate me at any time in accordance with its established policies and procedures. No representatives of the Borough of Municipal Name may make any assurances to the contrary. I understand that any offer of employment may be subject to job-related medical, physical, drug, or psychological tests. I also understand that employment is conditional on passing a complete background and criminal history check.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Conditions of Employment:**

Please be advised that all offers of employment are conditional on the applicant passing a mandatory criminal background check. A pre-employment physical and drug test may also be required. Pursuant to our personnel policy, all job applicants are required to sign a consent form for drug testing and if the test results are positive and are not accounted for by the legal use of prescription or non-prescription drugs the applicant shall be ineligible for hire unless they can establish a legal basis for the use of the drug or controlled substance for which they test positive. *For your application to be considered, you must sign and date below.*

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

# Voluntary Affirmative Action Information

You are not required to provide this information. Provide only if you wish.

If you provide information on this page, it will be filed separately from the job application. This information will be used only for purposes of the affirmative action program.

## Applicant Information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/town: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_

Position Applied For: \_\_\_\_\_

How did you learn about this position?     Advertisement     Employment Agency  
 Friend     Relative     Walk-in     Other (Explain) \_\_\_\_\_

## Information Regarding Status:

Gender:

Male

Female

Equal Employment Opportunity identification groups:

White

African-American (non-Hispanic)

Hispanic

American Indian/Alaskan native

Asian/Pacific Islander

Other \_\_\_\_\_

Other protected Groups:

Individual with a disability

Vietnam-era veteran (served between 1964 and 1975)

Disabled veteran

**For Borough of Municipal Name use only**

Hired:  Yes     No    Position \_\_\_\_\_ Date \_\_\_\_\_

Which EEO job classification best describes the position for which the applicant applied?  
(Circle One)

1. Officials and Managers

4. Sales workers

7. Operators( semi-skilled)

2. Professionals

5. Office and clerical workers

8. Laborers (unskilled)

3. Technicians

6. Craft workers (skilled)

9. Service workers

Borough of Municipal Name Official \_\_\_\_\_

Date \_\_\_\_\_

**This page for Borough of Atlantic Highlands use only!**  
**Results of interview**

**Interviewer:** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**BOROUGH OF ATLANTIC HIGHLANDS EMPLOYMENT APPLICATION  
CRIMINAL HISTORY SUPPLEMENT**

**In accordance with the Opportunity to Compete Act, P.L. 2014, c. 32, the Borough of Atlantic Highlands requires applicants to provide criminal history information after the completion of the initial employment application process. The initial employment application process ends after the Borough's first interview with the applicant. If you have completed your first interview with the Borough, please complete this supplement to the employment application.**

Other than minor traffic violations, have you ever been convicted of a criminal offense that has not been expunged or sealed by court order?

Yes       No

Note: A conviction does not automatically mean that you will not be selected. The crime you were convicted of and how long ago you were convicted are important. If you answered yes, please provide the information requested below for each conviction so that the Borough of Municipal Name may make an informed decision. (Please attach additional pages if needed).

Date of Conviction: \_\_\_\_\_  
Violation: \_\_\_\_\_  
Specific Statutory Code Violated: \_\_\_\_\_  
Location: \_\_\_\_\_  
Court Disposition: \_\_\_\_\_  
Police Agency Concerned: \_\_\_\_\_  
Description of Incident: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I certify that the answers provided above are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this criminal history supplement as may be necessary in arriving at an employment decision. I release former employers and others from any liability that might arise from the disclosure of information.

I understand that the discovery of any misrepresentation or omission of fact in this criminal history supplement will result in the rejection of my employment application, or in the event of employment, provide cause for termination of employment. I understand that all positions require a complete criminal history check as a condition of employment.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_