



BRIDGEWATER TOWNSHIP APPLICATION FOR EMPLOYMENT

We consider applications for all positions without regard to race, color, religion, creed, sex, national origin, disability, sexual orientation, citizenship status or any other legally protected status. Residency Requirement: NOTE: New public employees are required to obtain New Jersey residency within one (1) year of employment.

(PLEASE PRINT)

Position(s) Applied For	Date of Application
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How Did You Learn About Us?
 Website Job Posting Other _____

Last Name	First Name	Middle Name
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Address	Number	Street	City	State	Zip Code
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Home Phone Number	Cell Phone Number	Other Phone Number
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Effective Sept. 1, 2011 all new employees must comply with "New Jersey First Act", N.J.S.A. 52:14-7 (L.2011, Chap.70). The law requires that all employees of a public employer must reside in the State of New Jersey unless otherwise exempted under the law. If you do not live in New Jersey, you have one year after the date you start your position to relocate your residence to New Jersey.

Yes No

Have you filed an application with Bridgewater Township? If yes, when and for what position? Yes No

Have you ever been employed with Bridgewater Township? Yes No
 If Yes, give date _____

Do any of your friends or relatives who work here? If yes, who? Yes No

Are you currently employed?..... Yes No

May we contact your present employer?..... Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status
Proof of citizenship or immigration status will be required upon employment... Yes No

Date available for work ____/____/____ What is your desired salary range? _____

Are you applying for: Full-Time
 Part-Time Available Time: _____

Are you currently on "lay-off" status and subject to recall?..... Yes No

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

EDUCATION

	Name and Address of School	Course of Study	Number of Years Completed	Diploma Degree
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Describe any specialized training, apprenticeship, skills, and extra-curricular activities.

Describe any job-related training received in the United States military

EMPLOYMENT EXPERIENCE

1. Employer		Dates Employed		Work Performed
Address		From	To	
Telephone Number(s)		Hourly Rate/Salary		
Job Title	Supervisor	Starting	Final	
Reason for Leaving				
2. Employer		Dates Employed		Work Performed
Address		From	To	
Telephone Number(s)		Hourly Rate/Salary		
Job Title	Supervisor	Starting	Final	
Reason for Leaving				
3. Employer		Dates Employed		Work Performed
Address		From	To	
Telephone Number(s)		Hourly Rate/Salary		
Job Title	Supervisor	Starting	Final	
Reason for Leaving				
4. Employer		Dates Employed		Work Performed
Address		From	To	
Telephone Number(s)		Hourly Rate/Salary		
Job Title	Supervisor	Starting	Final	
Reason for Leaving				

If you need additional space, please continue on a separate sheet of paper.

List professional certifications, license or any other:

ADDITIONAL INFORMATION

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

State any additional information you feel may be helpful to us in considering your application.

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Can you perform the essential functions of the job, for which you are applying, either with or without a reasonable accommodation? YES NO

BUSINESS REFERENCES	
1. _____ (Name)	() _____ Phone #
(Address)	
2. _____ (Name)	() _____ Phone #
(Address)	
3. _____ (Name)	() _____ Phone #
(Address)	
PERSONAL REFERENCES	
1. _____ (Name)	() _____ Phone #
(Address)	
2. _____ (Name)	() _____ Phone #
(Address)	
3. _____ (Name)	() _____ Phone #
(Address)	

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an *"at will"* nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this *"at will"* employment relationship may to be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date