Township of Medford Human Resources

49 Union Street · Medford, NJ 08055 609-654-2608 (Ext/ 328) • dmerriman@medfordtownship.com •

An Equal Opportunity Employer

APPLICATION FOR EMPLOYMENT

All persons shall be afforded equal opportunity in all aspects of employment without regard to race, color, religion, sex (including pregnancy, sexual orientation, and gender identity), national origin, age, disability, genetic information, or any other basis protected by federal, state, and/or local law.

All persons requiring reasonable accommodation to complete the application and/or interview process should notify the Human Resources Office.

PLEASE PRINT ANSWERS TO ALL QUESTIONS AND COMPLETE ALL SPACES ON APPLICATION EVEN IF SUBMITTING RESUMÉ

Position applied for:	Date of application:		
Full legal name	Home Phone ()		
Last First	Middle		
Address	Other Phone ()		
City State	Zip E-mail Address		
Referral Source Walk-in Township Employe			
Newspaper	Other (specify)		
Type of Employment Desired	Full-time		
Relatives employed by the Township of Medford			
May we contact you at work Yes No	Work Phone		
Have you ever been an employee of the Township of Medfe	ord?		
If yes, please give date(s) and position(s)			
Have you previously applied for a position with the Townsh	nip of Medford?		
When will you be available for work?/			
What is your desired salary range or hourly rate?			
If you are under the age of 18, are you able to furnish a work permit?			
If no, please explain			
For purposes of compliance with the Immigration Reform a United States?	and Control Act, are you legally eligible for employment in the Yes No		
If they have been explained, are you able to meet the schedu	ule and attendance requirements of this position?		
	☐ Yes ☐ No		
Are you able to work overtime if required?			
Have you ever been bonded?			
Driver's license number (if driving is an essential job functi	ion) State		

Employment History

Starting with the most recent, describe ALL paid, military, and applicable volunteer experience. Attach resume, if necessary. Explain any gaps in employment in **Comments** section below.

Employer	Sta	art Date	End Date	
Employer Address		Starting Position		
Employer Telephone and/or email address		Position upon Leaving		
Name and Title of Supervisor	Name and Title of Supervisor		Reason for Leaving	
Brief Description of Responsibilities				
	1			
Employer	Sta	art Date	End Date	
Employer Address		Starting Position		
Employer Telephone and/or email address		Position upon Leaving		
Name and Title of Supervisor		Reason for Leaving		
Brief Description of Responsibilities				
Employer	Sta	art Date	End Date	
Employer Address		Starting Position		
Employer Telephone and/or email address Position upon Leaving		Position upon Leaving		
Name and Title of Supervisor Reason for		Reason for Leaving	r Leaving	
Brief Description of Responsibilities				
Comments (include explanation of any gaps in employment and indicate any further information that may be relevant to your ability to perform in the position for which you have applied)				
Skills and Qualifications				
Summarize any special training, skills, training, seminars, workshops, certifications and/or licenses you have that may qualify you as being able to perform job-related functions in the position for which you are applying.				
Computer Skills (Check appropriate boxes and indicate software titles	s with	which you have had experience)		
Word Processing		E-mail		
Spreadsheet		Internet		
Presentation		Other		

Education

Starting with your most recent school attended, provide the following information.	If education is under a different name,	indicate the name in the
box for the corresponding school.		

SCHOOL (Include City and State)	YEARS COMPLETED	DEGREE/ DIPLOMA/ CERTIFICATION	MAJOR	MINOR

References

List three references, not including relatives and previous employers, who know your qualifications.

NAME	RELATIONSHIP TO YOU	TELEPHONE	NUMBER OF YEARS KNOWN
		()	
		()	

Additional Information

List professional, trade, business or civic associations and any office held.

Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, Veteran/Reserve National Guard or any other similarly protected status.

ORGANIZATION	OFFICES HELD

List special accompnishments, awards, etc.
Exclude information that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, Veteran/Reserve National Guard or any other similarly protected status.

List any additional information you would like us to consider.		
Certification		
I hereby certify that all entries on the application and attachments a omission or material misstatement on my application, résumé or application, regardless of time of discovery, may cause forfeiture on the Township of Medford.	other document submitted in support of my	
I understand that any offer of employment by the Township of Medireference and background check, post offer physical, drug/alcohol test		
Signature	Date	
Andrew for for Declaration of Deference Charles		
Authorization for Background and Reference Check	t to confication and I consent to coincing!	
I understand that all information that I have provided is subject history background checks and any verification for bonding, when recontact references, former employers and educational institutions list Township to rely upon and use, as it sees fit, any information received discharge the Township, my former employers, their respective officer and entities from any and all claims, demands, and liabilities arising out of disclosure.	quired. I authorize the Township of Medford sted regarding this application. I authorize the from such contacts. I hereby fully release and s, employees and agents, and all other persons	
Signature	Date	
NOTICE TO APPLICANTS AND EMPLOYEES We are proud to be a DRUG-FREE workplace		

Screening tests for alcohol and illegal drug use may be required before hiring and during your employment here