



TOWNSHIP OF MORRIS

50 WOODLAND AVENUE, PO BOX 7603
 CONVENT STATION, NEW JERSEY 07961-7603
WWW.MORRISTWP.COM

EMPLOYMENT APPLICATION

AN EQUAL OPPORTUNITY EMPLOYER

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

APPLICANT INFORMATION										
Last Name					First				M.I.	Date
Street Address							Apartment/Unit #			
City					State				ZIP	
Phone					E-mail Address					
Date Available				Social Security No.				Desired Salary		
Position(s) Applied for										
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Have you ever worked for the Township of Morris?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?							
Are you available to work:	Full Time <input type="checkbox"/>	Part Time <input type="checkbox"/>	Temporary <input type="checkbox"/>	Seasonal <input type="checkbox"/>						
Do you have a valid CDL license, minimum Class "B"? * Only required for DPW Driver Position	YES <input type="checkbox"/>	NO <input type="checkbox"/>	N/A <input type="checkbox"/>							
Where did you learn about us?										
Indicate any foreign language(s) you can speak, read, or write.										
EDUCATION										
High School					Address					
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree					
College					Address					
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree					
Other					Address					
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree					

PREVIOUS EMPLOYMENT(MOST RECENT EMPLOYER FIRST)

Company		Phone	
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Address		Supervisor	
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Job Title		Starting Salary	\$	Ending Salary	\$
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Responsibilities					
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From		To		Reason for Leaving	
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May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	

Company		Phone	
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Address		Supervisor	
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Job Title		Starting Salary	\$	Ending Salary	\$
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Responsibilities					
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From		To		Reason for Leaving	
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May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	

Company		Phone	
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Address		Supervisor	
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Job Title		Starting Salary	\$	Ending Salary	\$
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Responsibilities					
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From		To		Reason for Leaving	
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May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	

SPECIALIZED SKILLS

OUTLOOK <input type="checkbox"/>	EXCEL <input type="checkbox"/>	WORD <input type="checkbox"/>	POWERPOINT <input type="checkbox"/>
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EDMUNDS <input type="checkbox"/>	GIS (GEOCLIENT) <input type="checkbox"/>	OTHER <input type="checkbox"/> LIST OTHER COMPUTER PROFICIENCIES
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REFERENCES

Please list three professional references.

Full Name		Relationship	
Company		Phone	
Address			
Full Name		Relationship	
Company		Phone	
Address			
Full Name		Relationship	
Company		Phone	
Address			

ADDITIONAL INFORMATION

DESCRIBE ANY SPECIALIZED TRAINING, APPRENTICESHIPS, JOB RELATED SKILLS, AND QUALIFICATIONS ACQUIRED FROM EMPLOYMENT OR OTHER EXPERIENCES.

DISCLAIMER AND SIGNATURE

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 90 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

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 not 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		Date	
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