TOWNSHIP OF WEST ORANGE
APPLICATION FOR EMPLOYMENT

Return To: TOWNSHIP OF WEST ORANGE
PERSONNEL DEPARTMENT, ROOM 112 Date:
66 MAIN STREET  
WEST ORANGE, N.J. 07052

Email: admin@westorange.org

This application is NOT to be used for police officer and/or firefighter entry level positions within the Township of West Orange. Applications for those two public safety positions will only be provided upon successful completion of the New Jersey Department of Personnel testing process or through the New Jersey Department of Personnel Intergovernmental Transfer Program.

PLEASE TYPE OR PRINT CLEARLY!

1. LAST NAME  FIRST NAME  MIDDLE NAME

2. HOME TELEPHONE  CELL/MOBILE TELEPHONE  EMAIL ADDRESS

3. Are you legally authorized to work in the United States?  ☐ Yes  ☐ No
   (You will be required to provide proof of your ability to work in the US after hire.)

4. Current Address

   ## STREET NAME  CITY
   How long at this address?

5. Previous Address

   ## STREET NAME  CITY
   How long at this address?

6. Position Applied For

7. Are you able to perform the functions of the position that you are applying for either with or without an accommodation based on the job description?  ☐ Yes  ☐ No

8. How did you learn of the position?

9. Date you can begin employment?

10. Salary Desired?
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(NOTE: This next section for driver’s license information (including CDL License) is only required when the job title you are seeking requires a driver’s license.)

11. Driver’s License # _______________________________ State _____________

12. Has your driver’s license privileges ever been suspended/revoked in this or any other state? □ Yes □ No

13. If yes, provide details:

14. Do you have a Commercial Driver’s License (CDL)? □ Yes □ No

   If yes, list endorsements:

15. Have you ever received a moving violation traffic ticket? □ Yes □ No

   If yes, provide information on each and every summons:

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<th>Date</th>
<th>Charge/Violation</th>
<th>Jurisdiction</th>
<th>Penalty</th>
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16. Have you ever previously applied for a Township of WO position? □ Yes □ No

17. If yes, provide details:
18. Have you ever been convicted of a crime(s)? □ Yes □ No
(NOTE: A conviction does NOT automatically exclude you from employment!)

19. If yes, provide date of conviction and crime/offense:

20. List three (3) references of non-relatives who you have known for at least one (1) year:

   a. Reference #1
   Home Address
   Telephone
   Home Work Cell
   How long have you known this person?

   b. Reference #2
   Home Address
   Telephone
   Home Work Cell
   How long have you known this person?

   c. Reference #3
   Home Address
   Telephone
   Home Work Cell
   How long have you known this person?
21. List all current and former employers, including full-time, part-time, and seasonal. List employers in reverse chronological order beginning with your present employer and work backwards. If you were discharged or were requested to resign by an employer, answer so in the Reason for Leaving section.

a. Current Employer: __________________________________________________________________________
   
   Address
   
   Street   City   State   Zip
   
   Telephone # ________________  □ Full Time  □ Part Time
   
   Employed from: ________________ to ________________
   
   Position/Title __________________________  Supervisor’s Name
   
   Hours per week __________________________
   
   Reason for leaving __________________________
   

b. Employer #2: __________________________________________________________________________
   
   Address
   
   Street   City   State   Zip
   
   Telephone # ________________  □ Full Time  □ Part Time
   
   Employed from: ________________ to ________________
   
   Position/Title __________________________  Supervisor’s Name
   
   Hours per week __________________________
   
   Reason for leaving __________________________
c. Employer #3: ____________________________________________

Address


Telephone # ___________________________ □ Full Time □ Part Time

Employed from: ________________________ to ________________________

Position/Title ___________________________ Supervisor’s Name

Hours per week ___________________________

Reason for leaving ___________________________

d. Employer #4: ____________________________________________

Address


Telephone # ___________________________ □ Full Time □ Part Time

Employed from: ________________________ to ________________________

Position/Title ___________________________ Supervisor’s Name

Hours per week ___________________________

Reason for leaving ___________________________

e. Employer #5: ____________________________________________

Address


Telephone # ___________________________ □ Full Time □ Part Time

Employed from: ________________________ to ________________________

Position/Title ___________________________ Supervisor’s Name

Hours per week ___________________________

Reason for leaving ___________________________
22. Special licenses or skills? (typing, steno, trade, etc.)

1. ☐ YES ☐ NO

Please list: (continue on back if necessary)

________________________________________________________________________

________________________________________________________________________

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________________________________________________________________________

________________________________________________________________________

I understand that as a condition of employment, I may be required to take and pass an employment physical examination and drug screening examination. Such examination will be performed after a conditional job offer has been made, but prior to starting work.

I hereby authorize the Township of West Orange to verify all of the information that I have provided including, but not limited to checking my criminal history, checking my driving record, verifying my residency, references, and work record.

I understand that any misrepresentation or omission of facts on this application is sufficient cause for denial of employment and that any misrepresentation or omission of facts on this application discovered after accepting employment is cause for dismissal.
I understand that the Township of West Orange is an “at will” employer consistent with applicable Federal and State law, including the New Jersey Civil Service Act, and New Jersey Department of Personnel Rules.

I understand that employment with the Township of West Orange is not for a fixed term or definite period and may be terminated at the will of either party, with or without cause, and without prior notice, consistent with applicable law.

Signature: ________________________________ Date: ________________________________

For Township Use Only:

Interviewed by: ________________________________ Date: ________________________________

Comments: ________________________________________________________________
                                                                                       ________________________________________________________________
                                                                                       ________________________________________________________________
                                                                                       ________________________________________________________________
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