## TOWNSHIP OF LOWER ALLOWAYS CREEK PO Box 157

## 501 Locust Island Road Hancocks Bridge, New Jersey 08038

## APPLICATION FOR EMPLOYMENT

www.lowerallowayscreek-nj.gov

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state or federal law. Equal access to employment, services and programs is available to all persons. Those applicants requiring reasonable accommodations to the application and/or interview process should notify a representative of the organization.

Position applied for: Superintendent of Public Works				Employment type: Full Time			
Name:				Date:	/	/	
Address:							
Phone # Home :	Cell:		_ Email:				
Drivers license #:		Note: you may be contacted by ema					
What would be your travel time to ou	r Public Works Location	?					
How were you referred to us ?							
EMPLOYMENT HISTORY Please provide	e all employment informati	on for your past t	hree employ	ers starting w	ith the m	ost recent	
Employer:			_ Position H	eld:			
Address:			Telephone	#:			
Immediate supervisor and title:							
Dates employed: From:		to:					
Reason for leaving:							
Employer:			_ Position H	eld:			
Address:			Telephone	#:			
Immediate supervisor and title:							
Dates employed: From:		to:					
Reason for leaving:							
Employer:			_ Position H	eld:			
Address:			Telephone	#:			
Immediate supervisor and title:							
Dates employed: From:		to:					
Reason for leaving:							

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APPLICATION FOR EMPLOYMENT	Employment History Continued	www.lowerallowayscreek-nj.gov			
Employer:	loyer: Position Held:				
Address:	Telephone #:				
Immediate supervisor and title:					
Dates employed: From:	to:				
Reason for leaving:					
	SKILLS				
Computer: List all software/program	ns you have used and level your of p	proficiency:			
Summarize any job related training,	skills licenses certifications and/a	or other qualifications			
Summurize any joo retated training,	, skiiis, ticenses, certifications and	oner qualifications			
	<b>EDUCATION</b>				
High School:					
College / Technical:					
Other Training					
REFERENCES (must be supplied) L	ast three references: Name, phone no	umber and years known (not relatives)			
I hereby authorize the potential employer to contact, o					
educational institutions and references. I also hereby r information to make employment decisions and all oth					
material omissions made by me on this application will	· · · · · · · · · · · · · · · · · · ·	• • •			
employed, or whenever it may be discovered. If I am e	- · ·				
	- · · · · · · · · · · · · · · · · · · ·	ne relationship at will, with or without cause, at any time, rganization not to refuse to hire or otherwise discriminat			
against a qualified individual with a disability because t		_			
employed, I will be required to provide satisfactory pro					
within the required time shall result in immediate term seek employment under these conditions.	nination of employment. I represent and warrant that	I have read and fully understand the foregoing and that I			
. ,					
Applicant's Signature:		Date://			

In order for this application to be considered, it must be completely filled out. An incomplete application will not be considered for the position applied for. Please note that if the position has an application closing date, applications submitted after the designated closing date will not be considered