



**Township of Wall
2700 Allaire Road
Wall, NJ 07719**

****TEMPORARY SEASONAL EMPLOYMENT APPLICATION****

Application Information:

Name (Last, First, Middle): _____

Address: _____

City/Town: _____

Phone (Cell): _____ (Home): _____

Social Security Number: ____ - ____ - ____

Position applied for: _____

Have you ever applied to the Township of Wall before: ____ Yes ____ No

Date you can start: _____

Are you currently employed: ____ Yes ____ No ____ May we contact you at work: ____ Yes ____ No

May we contact your current employer: ____ Yes ____ No

Do you possess a current driver's license: ____ Yes ____ No

Do you possess a current commercial driver's license: ____ Yes ____ No

Please list any endorsements: _____

If you are under eighteen years of age, can you provide proof of eligibility to work: ____ Yes ____ No

Are you legally eligible to work in the United States of America: ____ Yes ____ No

Pursuant to Federal Law, proof of US Citizenship or immigration status will be required if you are hired.

Have you ever pleaded guilty or been found guilty of a crime or disorderly person offense:

The Township of Wall is an Equal Opportunity Employer: please circle M/F

Employment History: This section must be completed even if attach a resume.
 List your last four employers, major assignments within the same employer. Begin with the most recent. Include any military service. Explain any gaps in employment in the space on this form marked comments located on the bottom of this page.

(1) Employer:	Date Started:
Address:	Starting Salary: Final Salary:
Job Title:	
Reason for Leaving:	
Supervisor's name and phone number:	
May we contact for a reference: <input type="checkbox"/> Yes <input type="checkbox"/> No	
(2) Employer:	Date Started:
Address:	Starting Salary: Final Salary:
Job Title:	
Reason for Leaving:	
Supervisor's name and phone number:	
May we contact for a reference: <input type="checkbox"/> Yes <input type="checkbox"/> No	

Education: Provide information on your formal schooling and education. Include elementary, secondary, and post-secondary, if any. Include any formal, vocational, or professional education. For high school and post-secondary education, indicate any major or specialty, such as Academic, Business, or Trade.

School:	Years Completed:
High:	1 2 3 4
College:	1 2 3 4
Other:	1 2 3 4

Special Skills & Experience: State any special skills, experience, training, licenses, certifications or other factors that make you especially qualified for the position for which you are applying for.

Comments & Additional Information: Is there any additional information about you we should consider?

References: Provide the names, addresses and phone numbers of three of three people whom we may contact as a reference. They should not be relatives or former supervisors.

Name & Address:	Phone Number:

Understandings and Agreements:

As an applicant for a position with the Township of Wall, I understand and agree that I must provide truthful and accurate information in this application. I understand that my application may be rejected if any information is not complete and accurate. If hired, I understand that I may be separated from employment if the Township of Wall later discovers that information on this form was incomplete, untrue or inaccurate. I give the Township of Wall the right to investigate the information I have provided, talk with former employers (except where I have indicated they may not be contacted). I give the Township of Wall the right to secure additional job-related information about me. I release the Township of Wall and its representatives from all liability for seeking such information. I understand that the Township of Wall is an equal-opportunity employer and does not discriminate in its hiring practices. I understand that the Township of Wall will make reasonable accommodations as required by the Americans with Disabilities Act. I understand that, if employed, I may resign at any time and that the of Wall may terminate me at any time in accordance with its established policies and procedures. No representatives of the Township of Wall may make any assurances to the contrary. I understand that any offer of employment may be subject to job-related medical, physical, drug, of psychological tests. I also understand that some positions may involve complete background and criminal checks. For your applications to be you must sign and date below.

