

Town of Kearny

402 Kearny Avenue, Kearny, NJ 07032 www.kearnynj.org

For Tow	n use only	7					
NJCSC postcard attached							
Yes	No	N/A					
Received by:							

Application for Employment

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.

*To be eligible for employment with the Town of Kearny, the following residential preference will apply:

Residents of: 1) Town of Kearny & City of Newark 2) Hudson & Essex Counties 3) State of NJ 4) Outside the State

*Applications are only accepted for positions that are advertised and received prior to the application deadline date

= =	mputer Operator Traine	=	Employment type: Part time				
Name:		Dar	te:				
Address:							
Phone #: Home	Cell	Email:	te: you may be contacted by email				
Drivers license #:			Note: you may be contacted by email Date available:				
	on to working nights or weekend		Yes No				
* Are you available to wor	k mornings, afternoons and Satur	day?	Yes No				
* Have you ever been prev	riously employed by our organiza	tion?	Yes No				
* If you are under 18, can	you furnish a work permit if requ	ired?	Yes No				
	rvice Commission's Rules and Rensideration in the hiring process.	gulations, veterans who ha	ve obtained the proper designation				
	ran's preference with the NJ Civi opy of the postcard confirming y		Yes No				
* If you have not yet appl Veterans Affairs, do yo	ied for Veteran's preference with u plan on doing so?	the NJ Department of Milit	tary and Yes No				
	the Town a copy of the postcard //www.state.nj.us/military/veterans/pref		Commission within 14 days				
How were you referred to	us?						
		nent History					
Please provide	all employment information for your						
Employer:		Position held:					
4 1 1		Telephone #:					
Immediate supervisor and	l title:						
	: to Fr	om:	Salary:				
5							
Employer:		Position held:					
Address:		Telephone #:					
Immediate supervisor and	title:						
		om:	Salary:				
Applicant's signature							

	Em	ployme	nt Histo	ry Continued					
Employer:									
A ddragg:	Position held: Telephone #:								
Immediate supervisor and title:									
Dates employed: From:		to	From:			Salary:			
Reason for leaving:									
			Skills						
Computer: List all software/progr	ams and level	of profi	ciency:						
Other skills and qualifications: S	ummarize any	job rela	ated train	ing, skills, licer	nses, certifica	ntes and/or other o	qualifications		
Language (s): Other than English	Readi	•	•	eck one)		Verbal (check one	·		
	Basic		ient	Fluent	Basic	Proficient	Fluent		
	Basic		eient	Fluent	Basic	Proficient	Fluent		
List schools name and location, ye	ears completed		Educati e of study		arned:				
High school:									
College: Technical									
training:									
Other:									
List three (3) references: r			•	be supplied) ears known (Do	o not include	relatives or empl	oyers)		
I hereby authorize the potential employer employers, educational institutions and r gathering and using such information to understand that any misrepresentations or tion or immediate termination of employer specified length of employment and that employer can terminate the relationship a I understand that it is in the policy of this because that persons need for a reasonab provide satisfactory proof of identity an required time shall result in immediate te that I seek employment under these condit	references. I also o make employment material omission ment if I am employment if I am employment if I am employment will, with or wist organization not le accommodation degal work automination of empions.	hereby renent decisions made loyed, or does not dethout cault to refuse on as required thorization ployment.	release from sions and aby me on the whenever is constitute a se, at any the to hire or hired by the on with thr. I represer	n liability the pot all other persons his application wi t may be discover an agreement or co- ime, so long as th otherwise discrime ADA. I also und ee (3) days of be at and warrant that	ential employer or organization Il be sufficient of ed. If I am emp ontract for emp ere is no violation inte against a derstand that if ing hired. Failure	r and its representations for providing successes for cancellation loyed, I acknowledge loyment. Accordinglation of applicable fed qualified individual I am employed, I with ure to submit such a fully understand the	ives for seeking, h information. In of this applica- e that there is no y, either I or the eral or state law. with a disability ill be required to proof within the ne foregoing and		
In order for this application to be ered for the position applied for.	Please note	that if t	he positio		ation closing	application will n date, application			
Applicant's signature				Da	te				



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This information on this form is used solely for aggregate statistical purposes. No information on this form is used in any decision regarding hiring, promotions, or terms and conditions of employment. DO NOT write your name or any other personal information on this form.

The Town of Kearny is an Equal Employment Opportunity Employer.

Position applied for: **REHS Part Time** Please identify your ethnic/racial background: Black White Hispanic Asian American Indian Other How did you learn of the job opening? Check all that apply and provide specific to the extend you recall Newspaper ad. Which newspaper: Unemployment Office. Which location: Community College. Which college: One Stop career center. Which location: Urban League. Which location. County Work Force office. Which location: Goodwill Industries. Which location. Web site. Which web site: NJ League of Municipalities Friend / Other. Please specify:

Poster in municipal building