



# EMPLOYMENT APPLICATION

Borough of Glassboro  
Human Resources  
1 S. Main Street  
Glassboro, NJ 08028  
(856) 881-9230 X 88172  
Fax: (856) 881-7563

We consider all applicants for all positions without regard to race, color, religion, creed, gender, national origin, disability or age. The Borough of Glassboro is an Equal Opportunity Employer.

<b>Position Applied for:</b>		Salary desired: _____	Date	
Last Name		First Name		Middle Initial
Address: Number/Street	City	State	Zip Code	
Telephone Number(s) (house phone, cell phone)				
Email Address				
How did you learn about the position?				
		<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	
		<input type="checkbox"/> Walk-In	<input type="checkbox"/> Other	
		<input type="checkbox"/> Relative	<input type="checkbox"/> Posting	

If you are under 18 years of age, can you provide proof of your eligibility to work?  Yes  No

Do you possess a valid driver's license  Yes  No

Do you possess a valid commercial driver's license?  Yes  No If Yes, which Class \_\_\_\_\_

Will you authorize us to check your Motor Vehicle Record?  Yes  No

Are you currently employed?  Yes  No

May we contact your previous employers?  Yes  No

Are you authorized to work in the United States?  Yes  No

On what date would you be available for work? \_\_\_\_\_

Are you available to work:  Full Time  Part Time  Shift Work  Temporary

# EDUCATION

Type of School	Name and Location of School	Degree/Area of Study	Number of Years Completed	Graduated (check One)
HIGH SCHOOL				<input type="checkbox"/> Yes <input type="checkbox"/> No
COLLEGE				<input type="checkbox"/> Yes <input type="checkbox"/> No
OTHER				<input type="checkbox"/> Yes <input type="checkbox"/> No

If a license, certificate, or other authorization is required or related to the position for which you are applying, complete the following:

License/Certification	Date Issued	Date expires	Issued by/Location of issuing authority (State or other authority)	License No.

Applicants may be required to provide proof of diploma, degree, transcripts, licenses, and certifications.

**Special Training/Skills/Qualifications:** List all job related training or skills you possess.  
 Example: machinery/equipment, office equipment; such as computer software and/or hardware etc.

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# EMPLOYMENT History

This information will be the official record of your employment history and must accurately reflect all significant duties performed. Summaries of experience should clearly describe your qualifications.

<b>Position Title:</b> _____ <b>Employer:</b> _____ <b>Location:</b> _____ <b>Employer's Telephone No.:</b> (____) _____ - _____ <b>Immediate Supervisor's Name:</b> _____	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part- Time <input type="checkbox"/> Summer <input type="checkbox"/> Temporary
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Start Date	End date	Average # hours per week	If supervisory, # of employees you supervised

**Summary of experience including special training/skills/qualifications you have used in the performance of this job:**

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**Specific reason for leaving:** \_\_\_\_\_

<b>Position Title:</b> _____ <b>Employer:</b> _____ <b>Location:</b> _____ <b>Employer's Telephone No.:</b> (____) _____ - _____ <b>Immediate Supervisor's Name:</b> _____	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part- Time <input type="checkbox"/> Summer <input type="checkbox"/> Temporary
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Start Date	End date	Average # hours per week	If supervisory, # of employees you supervised

**Summary of experience including special training/skills/qualifications you have used in the performance of this job:**

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**Specific reason for leaving:** \_\_\_\_\_

## EMPLOYMENT History *continued....*

This information will be the official record of your employment history and must accurately reflect all significant duties performed. Summaries of experience should clearly describe your qualifications.

<b>Position Title:</b> _____ <b>Employer:</b> _____ <b>Location:</b> _____ <b>Employer's Telephone No.:</b> (____) _____ - _____ <b>Immediate Supervisor's Name:</b> _____	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part- Time <input type="checkbox"/> Summer <input type="checkbox"/> Temporary
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Start Date	End date	Average # hours per week	If supervisory, # of employees you supervised

**Summary of experience including special training/skills/qualifications you have used in the performance of this job:**

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**Specific reason for leaving:** \_\_\_\_\_

<b>Position Title:</b> _____ <b>Employer:</b> _____ <b>Location:</b> _____ <b>Employer's Telephone No.:</b> (____) _____ - _____ <b>Immediate Supervisor's Name:</b> _____	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part- Time <input type="checkbox"/> Summer <input type="checkbox"/> Temporary
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Start Date	End date	Average # hours per week	If supervisory, # of employees you supervised

**Summary of experience including special training/skills/qualifications you have used in the performance of this job:**

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**Specific reason for leaving:** \_\_\_\_\_

