

732-793-3700

1701 North Ocean Avenue, Seaside Park, New Jersey 08752 www.seasideparknj.org

FAX 732-793-3737

Employment Application

Date of Submission:				
Position Applying For:				
Name:				
Name: Last	First		Middle	
Social Security Number:				
Address (Permanent):				
Stree	et	City	State	Zip
Phone:				
Cel	1	Home		
Email:				
Address (local/seasonal if d	lifferent from above):		
	Emergency Con	ntact Inforn	nation	
Name:				
Relationship:		Phone Number:		
Name:				
Relationship:		Phone Nu	mber:	



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Employment Questions

Have you ever applied to the Borough of Seaside Park before?		No
Salary Desired: _		
Part Time:		
	Yes	No
	Yes	No
May we contact your current employer?		
Are you currently on layoff status and subject to recall?		No
Do you possess a current Driver's License?		
_	Yes	No
a provide proof of	eligibility to wo	ork: No
		No
nd indicate level o	f proficiency:	
		vhich you
	Salary Desired:	Salary Desired:



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Area of Study

Education: Please provide information on your formal schooling and education. Please fill out the table below to the best of your ability. Include any formal vocational or professional education.

*Please include any degrees earned in the bottom box.

Year Graduated or

Name

	Anticipated Graduation		
High School			
College / University			
g : 1: 1			
Specialized Training, Trade			
School, etc.			
Other Education			
Daguaga Farmad			
Degrees Earned			
	Work History		
Employer:	Title:		
Address:	Years Worked:		
Brief Description of Respo	ities:		
Employer:	Title:		
Address:	Years Worked:	Years Worked:	
Brief Description of Respo	ities:		
Employer:	Title:		
Address:	Years Worked:		
	Tears Worker.		



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Brief Description of Responsibilities:				
References Please provide the names, addresses and phone numbers of at least (3) people whom we may contact				
Name:	Phone Number:			
Address:	Years Known:			
Name:	Phone Number:			
Address:	Years Known:			
Name:	Phone Number:			
Address:	Years Known:			
Comments and Additional Information: Is there should consider?	any additional information about you that we			



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Understanding and Agreements:

As an applicant for a position with the Borough of Seaside Park, 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, true, and accurate. If hired, I understand that I may be separated from employment if the Borough of Seaside Park later discovers that information on this form was incomplete, untrue, or inaccurate. I give the Borough of Seaside Park the right to investigate the information I have provided and talk with former employees (except where I have indicated they may not be contacted). I waive the Borough of Seaside Park and its representatives from all liability for seeking such information. I understand that the Borough of Seaside Park is an Equal Opportunity Employer and does not discriminate in its hiring practices. I understand that the Borough of Seaside Park 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 Borough of Seaside Park may terminate me at any time in accordance with its stablished policies and procedures. No representatives of the Borough of Seaside Park may make any assurance to the contrary. I understand that any offer of employment may be subject to job-related medical, physical, drug, or psychological tests. I also understand that some positions may involve complete background and criminal checks.

For your application to	be considered, you must sign of	and date below.	
Applicants Signature:		Date:	