

# Township of Evesham

## Human Resources

984 Tuckerton Road · Marlton, NJ 08053

856-983-2900 (Ext/ 4339) • [www.evesham-nj.org](http://www.evesham-nj.org) • [hr@evesham-nj.gov](mailto:hr@evesham-nj.gov)

*An Equal Opportunity Employer*

### APPLICATION FOR EMPLOYMENT

All persons shall be afforded equal opportunity in all aspects of employment without regard to race, color, religion, sex (including pregnancy, sexual orientation, and gender identity), national origin, age, disability, genetic information, or any other basis protected by federal, state, and/or local law.

All persons requiring reasonable accommodation to complete the application and/or interview process should notify the Human Resources Office.

**PLEASE PRINT ANSWERS TO ALL QUESTIONS AND COMPLETE ALL SPACES ON APPLICATION EVEN IF SUBMITTING RESUMÉ**

Position applied for: \_\_\_\_\_ Date of application: \_\_\_\_\_

Full legal name \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_ Other Phone (\_\_\_\_) \_\_\_\_\_  
City State Zip E-mail Address \_\_\_\_\_

Referral Source  Walk-in  Township Employee \_\_\_\_\_  Twp. Website  
 Newspaper \_\_\_\_\_  Other (specify) \_\_\_\_\_

Type of Employment Desired .....  Full-time  Part-time  Seasonal  Temporary

Relatives employed by the Township of Evesham \_\_\_\_\_

May we contact you at work?  Yes  No Work Phone (\_\_\_\_) \_\_\_\_\_

Have you ever been an employee of the Township of Evesham? .....  Yes  No

If yes, please give date(s) and position(s) \_\_\_\_\_

Have you previously applied for a position with the Township of Evesham? .....  Yes  No

When will you be available for work? \_\_\_\_/\_\_\_\_/\_\_\_\_

What is your desired salary range or hourly rate? \_\_\_\_\_

If you are under the age of 18, are you able to furnish a work permit? .....  Yes  No

If no, please explain \_\_\_\_\_

For purposes of compliance with the Immigration Reform and Control Act, are you legally eligible for employment in the United States?.....  Yes  No

If they have been explained, are you able to meet the schedule and attendance requirements of this position?.....  Yes  No

Are you able to work overtime if required? .....  Yes  No  
If no, please explain \_\_\_\_\_

Have you ever been bonded? .....  Yes  No

Driver's license number (if driving is an essential job function) \_\_\_\_\_ State \_\_\_\_\_

## Employment History

Starting with the most recent, describe ALL paid, military, and applicable volunteer experience. Attach resume, if necessary. Explain any gaps in employment in **Comments** section below.

<b>Employer</b>	<b>Start Date</b>	<b>End Date</b>
<b>Employer Address</b>	Starting Position	
<b>Employer Telephone and/or email address</b>	Position upon Leaving	
Name and Title of Supervisor	Reason for Leaving	
Brief Description of Responsibilities		
<b>Employer</b>	<b>Start Date</b>	<b>End Date</b>
<b>Employer Address</b>	Starting Position	
<b>Employer Telephone and/or email address</b>	Position upon Leaving	
Name and Title of Supervisor	Reason for Leaving	
Brief Description of Responsibilities		
<b>Employer</b>	<b>Start Date</b>	<b>End Date</b>
<b>Employer Address</b>	Starting Position	
<b>Employer Telephone and/or email address</b>	Position upon Leaving	
Name and Title of Supervisor	Reason for Leaving	
Brief Description of Responsibilities		

**Comments** (include explanation of any gaps in employment and indicate any further information that may be relevant to your ability to perform in the position for which you have applied)

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## Skills and Qualifications

Summarize any special training, skills, training, seminars, workshops, certifications and/or licenses you have that may qualify you as being able to perform job-related functions in the position for which you are applying.

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**Computer Skills** (Check appropriate boxes and indicate software titles with which you have had experience)

<input type="checkbox"/> Word Processing	_____	<input type="checkbox"/> E-mail	_____
<input type="checkbox"/> Spreadsheet	_____	<input type="checkbox"/> Internet	_____
<input type="checkbox"/> Presentation	_____	<input type="checkbox"/> Other	_____

## Education

Starting with your most recent school attended, provide the following information. If education is under a different name, indicate the name in the box for the corresponding school.

SCHOOL (Include City and State)	YEARS COMPLETED	DEGREE/ DIPLOMA/ CERTIFICATION	MAJOR	MINOR

## References

List three references, not including relatives and previous employers, who know your qualifications.

NAME	RELATIONSHIP TO YOU	TELEPHONE	NUMBER OF YEARS KNOWN
		( )	
		( )	
		( )	

## Additional Information

List professional, trade, business or civic associations and any office held.

Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, Veteran/Reserve National Guard or any other similarly protected status.

ORGANIZATION	OFFICES HELD

List special accomplishments, awards, etc.

Exclude information that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, Veteran/Reserve National Guard or any other similarly protected status.

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List any additional information you would like us to consider.

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### Certification

I hereby certify that all entries on the application and attachments are true and complete. I understand that any omission or material misstatement on my application, résumé or other document submitted in support of my application, regardless of time of discovery, may cause forfeiture on my part of any employment in the service of the Township of Evesham.

I understand that any offer of employment by the Township of Evesham may be contingent upon the results of a reference and background check, post offer physical, drug/alcohol test or other pre-employment testing.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### Authorization for Background and Reference Check

I understand that all information that I have provided is subject to verification and I consent to criminal history background checks and any verification for bonding, when required. I authorize the Township of Evesham to contact references, former employers and educational institutions listed regarding this application. I authorize the Township to rely upon and use, as it sees fit, any information received from such contacts. I hereby fully release and discharge the Township, my former employers, their respective officers, employees and agents, and all other persons and entities from any and all claims, demands, and liabilities arising out of or in any way relating to such investigation or disclosure.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### NOTICE TO APPLICANTS AND EMPLOYEES

We are proud to be a  
**DRUG-FREE**  
workplace

Screening tests for alcohol  
and illegal drug use may be  
required before hiring and  
during your employment here