

Date you can start: _____ **Salary desired:** _____

Are you available to work: Full time ____ **Part time** ____ **Shift work** ____ **Temporary** ____

Are you currently employed: ____ **Yes** ____ **No**

If Yes, may we contact you at work: ____ **Yes** ____ **No**

May we contact your current employer: ____ **Yes** ____ **No**

Are you currently on layoff status and subject to recall: ____ **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: _____

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.

Employment History: This section must be completed even if you attach a resume. List your last three 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.

Employer: _____

Address: _____

Job Title: _____

Reason for leaving: _____

Date started: _____ Date left: _____

Starting Salary: _____ Final Salary: _____

Work performed/ Responsibilities: _____

Supervisor's Name and Phone Number: _____ / _____

May we contact for a reference: Yes ___ No ___

Employer: _____

Address: _____

Job Title: _____

Reason for leaving: _____

Date started: _____ Date left: _____

Starting Salary: _____ Final Salary: _____

Work performed/ Responsibilities: _____

Supervisor's Name and Phone Number: _____ / _____

May we contact for a reference: Yes ___ No ___

Employer: _____

Address: _____

Job Title: _____

Reason for leaving: _____

Date started: _____ Date left: _____

Starting Salary: _____ Final Salary: _____

Work performed/ Responsibilities: _____

Supervisor's Name and Phone number: _____ / _____

May we contact for a reference: Yes ___ No ___

Education: Provide information on your formal schooling and education. Include elementary, secondary, and post-secondary education, 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	Graduated	Course of Study
Elementary:	5 6 7 8	Y N	
High School:	1 2 3 4	Y N	
College:	1 2 3 4	Y N	
Other:	1 2 3 4	Y N	

Comments:

Languages: List any foreign languages you know and indicate your level of proficiency.

Language:	Speak Some:	Speak Fluently:	Read:	Write:

Comments:

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.

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

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

Name: _____ Address: _____	Phone Number: _____	Years Known: _____
Name: _____ Address: _____	Phone Number: _____	Years Known: _____
Name: _____ Address: _____	Phone Number: _____	Years Known: _____

Understandings and Agreements:

As an applicant for a position with the Township of Chatham, 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 Township of Chatham later discovers that information on this form was incomplete, untrue, or inaccurate. I give the Township of Chatham 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 Chatham the right to secure additional job-related information about me. I release the Township of Chatham and its representatives from all liability for seeking such information. I understand that the Township of Chatham is an equal-opportunity employer and does not discriminate in its hiring practices. I understand that the Township of Chatham 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 Township of Chatham may terminate me at any time in accordance with its established policies and procedures. No representatives of the Township of Chatham may make any assurances 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.

Applicant's Signature _____ Date _____

Conditions of Employment:

Please be advised that all offers of employment are conditional on the applicant passing a mandatory criminal background check and drug test. A pre-employment physical may also be required. Pursuant to our personnel policy, all job applicants for positions that require drug testing are required to sign a consent form for drug testing and if the test results are positive and are not accounted for by the legal use of prescription or non-prescription drugs the applicant shall be ineligible for hire unless they can establish a legal basis for the use of the drug or controlled substance for which they test positive.

For your application to be considered, you must sign and date below.

Applicant's Signature _____ Date _____

Township of Chatham Police Department
Voluntary Self Identification Form

**Completion of this form is voluntary and will not affect your opportunity for employment,
or the terms or conditions of your employment.**

If you provide information on this page, it will be filed separately from the job application. This information will be used only for reporting purposes pursuant to N.J.S.A. § 52:17B-4.10 et seq.

Applicant Information:

Name: _____
Position Applied For: _____
Date Completed: _____

Information Regarding Status:

Age:
Year of Birth: _____

Race:

- _____ American Indian or Alaska Native
- _____ Asian
- _____ Black or African-American
- _____ Native Hawaiian or other Pacific Islander
- _____ White
- _____ Two or more races
- _____ Other

Ethnicity:

- _____ Hispanic or Latino
- _____ Not Hispanic or Latino

Gender:

- _____ Male
- _____ Female
- _____ X or Non-Binary

Sexual Orientation (for applicant reporting only):
Do you identify as LGBTQ+? Yes No

FOR TOWNSHIP POLICE DEPARTMENT USE ONLY

Appointed: Yes No If Appointed, Date of Appointment: _____

Township Police Department Official _____ Date _____