

TYPING:

YES

NO

APPROX. SPEED \_\_

## EMPLOYMENT APPLICATION COUNTY OF BURLINGTON

## \* DEPARTMENT OF CORRECTIONS \*

			P	PART TIM	E	FULL T	ГІМЕ	
OFFICE:								
(PRINT OR TYPE)								
NAME (LAST) (FIRST) (MID	DLE)	SOCIAL SECURITY NUM		R	AREA CO	CODE & TELEPHONE NO.		
PRESENT ADDRESS (NUMBER & STREET)		(CITY)			(STATE)	(ZIP)		
ARE YOU A RESIDENT OF:		POSITION APPLYING FOR						
	EARS							
NEW JERSEY YE	EARS	N.J. DRIVERS LICENSE MA	E MAY BE REQUIRED FOR SOME POSITIONS.					
MILITARY RECORD-WHAT IS YOUR PRESENT NON-VETERAN VE	SELECTIVE	-SERVICE CLASSIFICATION TYPE OF DISCHARGE	:					
DATES OF SERVICE:	FROI	M	ТО					
LIST ALL HIGH SCHOOL, VOCATIONAL TRAINING SC	CHOOLS, COLI	LEGES, UNIVERSITIES OR GRAD	UATE SCH	OOLS WHICH	YOU HAVE ATT	ENDED.		
NAME		DATES ATTENDED	GRADUAT	E MAJOF	R AREA OF STUD	DY DE	EGREE OR LI	CENSE
	FRO	M:	YES					
	TO:		NO					
	FRO	M:	YES					
	TO:		NO					
	FRO	M:	YES					
	TO:		NO					
1. HAVE YOU EVER BEEN ARRESTED OF A CI	· ·	I HAS NOT BEEN EXPUNGED		COURT?		YE	S	NO
2. HAVE YOU EVER BEEN CONVICTED OF A C IF YES, GIVE DETAILS AND DATES OF EAC YOU FROM OBTAINING EMPLOYMENT UNL REMARKS:	H DISPOSIT	ION IN REMARKS SECTION (A	A CONVIC	TION WILL			RECLUDE	NO
3. HAVE YOU EVER ENGAGED IN ANY SEXUA OR OTHER INSTITUTION? 4. HAVE YOU EVER BEEN CONVICTED OF EN BY FORCE, OVERT OR IMPLIED THREATS ( OR REFUSE? 5. HAVE YOU EVER BEEN CIVILLY OR ADMINI PREVIOUS QUESTION? 6. DO YOU UNDERSTAND THAT YOU HAVE A SEXUAL MISCONDUCT THROUGHTOUT TH	GAGING OR OF FORCE C STRATIVEL' CONTINUIN	ATTEMPTING TO ENGAGE II OR COERCION, OR IF THE VIO OF ADJUDICATED TO HAVE ENGROUP TO DISCLOSE ANY A OF YOUR EMPLOYMENT?	N SEXUAL CTIM DID I	. ACTIVITY I NOT CONSE N THE ACTI CONTACT V	N THE COMMI NT OR WAS U	YE UNITY FA INABLE T YE RIBED IN ' YE FORCEME	S N CILITATED TO CONSEN ES N THE ES N	10
MACHINES OPERATED AND/OR SPECIAL SKIL								
LIST ANY OTHER LICENSES, CERTIFICATES (	OR INTERNS	HIPS RELATED TO YOUR SK	(ILL, PROF	ESSION OF	R TRADE.			

ARE YOU NOW OR HAVE YOU EVER BEEN A MEN PENSION FUND OR RETIREMENT FUND? (IF YES, RNGCUG'IF GP VIEIT "VJ G'RGP UIQP "HWP F *U# HTQO "QP G'QT"O QTG'QH'VJ GUG'HWP FU)				YES NO EGKXKPI "C"RGPUKQP			
HAVE YOU PREVIOUSLY APPLIED FOR EMPLOYM	YES NO						
(IF YES, WHEN?) DATE:							
I HEREBY GIVE MY CONSENT FOR TI	HE COUNTY OF BUI	RLINGTON TO OB	TAIN EMPLOYMEN	NT AND			
PROFESSIONAL REFERENCES.							
	Signatu	ıre	_				
	LOYMENT RECORD / BEGIN WITH PRESENT POSITION / ATTACH ADDITIONAL SHEETS OR RESUME IF APPLICABLE  IE AND ADDRESS OF EMPLOYER  TITLE:  BRIEF DESCRIPTION OF DUTIES:						
NAME AND ADDRESS OF EMPLOTER	IIILE.	BRIEF DESCRIPTION OF DUTIES.					
DATES OF EMPLOYMENT:	REASON FOR LEA	AVING:	FULL TIME	PART TIME			
FROM: TO:			NUMBER OF HOURS PER WEEK:				
NAME AND ADDRESS OF EMPLOYER	TITLE:	BRIEF DESCR	BRIEF DESCRIPTION OF DUTIES:				
DATES OF EMPLOYMENT:	REASON FOR LEA	AVING:	FULL TIME	PART TIME			
FROM: TO:			NUMBER OF HO	OURS PER WEEK:			
NAME AND ADDRESS OF EMPLOYER	TITLE:	BRIEF DESCR	RIPTION OF DUTIES:				
DATES OF EMPLOYMENT:	REASON FOR LEA	AVING:	FULL TIME	PART TIME			
FROM: TO:			NUMBER OF HOURS PER WEEK:				
REFERENCES: (GIVE NAMES OF THREE (3) UNRE	I ATED PERSONS WHOM	YOU HAVE KNOWN FOR					
NAME ADDRES			TELEPHONE NUMBER	POSITION			
HAVE YOU EVER BEEN EMPLOYED BY BURLINGT		YES N NO					
(IFYES,EXPLAIN): FROM:		то					
DEPARTMENT:		SUPERVISOR:					
REASON FOR LEAVING:							
I CERTIFY THAT THE INFORMATION ON THIS AP MISLEADING STATEMENT WILL BE CAUSE FOR WILL NOT BE EMPLOYED AS A LATERAL TRANS FOR BEING EMPLOYED, IF EMPLOYED, THE APF GIVE UP ANY AND ALL RIGHTS AND BENEFITS FOR NJSA 40A:9-5 AND ANY APPLICABLE STATUT	REJECTION OR REMOVAI FER FROM ANY OTHER P PLICANT BY HIS OR HER S IE OR SHE MIGHT OTHER	L. PLEASE TAKE NOTICE POSITION. PLEASE TAKE BIGNATURE AFFIXED BE	E THAT THE APPLICANT EFURTHER NOTICE THA ELOW DOES PRESENTLY	IF EMPLOYED T IN RETURN / WAIVE AND			
DATE OF APPLICATION:	SIGNATURE:						
				(DOC)			