

## City of Wildwood 4400 New Jersey Avenue, Wildwood, NJ 08260

## **EMPLOYMENT APPLICATION**

Wildwood, NJ 08260	(Rev. 2/2015)
Applicant Information:	Date applied:
Name (Last, First, Middle):	
Address:	_
City/Town:	•
Phone (Work): ( )	(Home): ( )
(Cell): ( )	(Email Address):
Social Security Number:	
	·
Position applied for:	
1 osition applied for.	
Have you ever applied to the City of Wildwoo	d before: YesNo If yes, give date
Date you can start:	Salary desired:
Are you available to work: Full time	_Part time Shift work Temporary
Are you currently employed:YesN	o May we contact you at work:YesNo
May we contact your current employer:	YesNo
Are you currently on layoff status and subject	t to recall:YesNo
Do you possess a current driver's license:	_Yes No
Do you possess a current commercial driver's	s license: Yes No
Please list any endorsements:	
If you are under eighteen years of age, can yo	u provide proof of eligibility to work:YesNo
Are you legally eligible to work in the United	
Pursuant to Federal Law, proof of US Citizenship	or immigration status will be required if you are hired

The City of Wildwood is an Equal Opportunity Employer M/F, ADA



Employment History: This section must be completed even if you attach a resume. List your last four 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:	Date started:	Date left:	Work performed/ responsibilities:
Address:	Starting Salary:		
Job Title:	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:	oo y aar ar	A CONTRACTOR OF THE PROPERTY O	
May we contact for a reference: Yes	_No		
Employer:	Date started:	Date left:	Work performed/ responsibilities:
Address:	CV-vii-v C 3		Topotoxomino.
Tob Tido	Starting Salary:		
Job Title:	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:			
May we contact for a reference: Yes	_No		
Employer:	Date started:	Date left:	Work performed/ responsibilities:
Address:	Starting Salary:		
Job Title:	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:			
May we contact for a reference: Yes	No		
Employer:	Date started:	Date left:	Work performed/ responsibilities:
Address:	S. L. S. I	·	T ODOMOIDIHITOS
Y.). Teal.	Starting Salary:		
Job Title:	Final Salary:		
Reason for leaving:		•	
Supervisor's name and phone number:	<b>4</b>	And the second s	
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: (Circle)	Graduated: (Circle)	Major Field:
High:	1 2 3 4	Yes No	
College:	1 2 3 4	Yes No	
Other:	1 2 3 4	Yes No	

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

Language:	Speak Fluently:	' Read:	Write:
	,		

## Military Experience:

Have you ever served in the U.S	Armed Forces? YES NO
If yes, what Branch?	Rank at discharge:
	hich may be relevant to the position for which you are
certifications or other factor	
certifications or other factor	rience: State any special skills, experience, training, licenses that make you especially qualified for the position for which you are copies of such certifications or licenses)
certifications or other factor	that make you especially qualified for the position for which you are

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

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Name & Address:	Phone Number:	Years Known:	
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•: 			
Understandings and Agreements: As an applicant for a position with the City of Wile provide truthful and accurate information in this ap may be rejected if any information is not complete, trumay be separated from employment if the City later incomplete, untrue, or inaccurate. I give the City information I have provided, talk with former employ not be contacted). I give the City the right to secure a release the City and its representatives from all liability that the City of Wildwood is an equal-opportunity empractices. I understand that the City will make reast Americans with Disabilities Act. I understand that, if the City may terminate me at any time in accordance and subject to collective bargaining agreements. No assurances to the contrary. I understand that any related medical, physical, drug, or psychological tests involve complete background and criminal checks. Find and date below.  Applicant's Signature  Applicant's Signature	plication. I understand the and accurate. If hire discovers that informate of Wildwood the riguers (except where I have difficult job-related informate of the seeking such informate of the accommodation employed, I may resign with its established porepresentatives of the offer of employment may also understand that	I that my application d, I understand that I ion on this form was ht to investigate the reindicated they may formation about me. I understand criminate in its hiring s as required by the at any time and that licies and procedures City may make any ay be subject to jobt some positions may	
This section for City of V	/ildressed was swi		
This section for City of Wildwood use only!  Results of interview			
Interviewer:			
Date:Time:			
Recommended for Hire: YES	O		

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