

520 Market Street, PO Box 95120 Camden, NJ 08101-5120 An Equal Opportunity Employer

## APPLICATION FOR EMPLOYMENT

All prospective employees will be required to pass a criminal background check and physical examination including urinalysis to test for the presence of drugs and alcohol.

All questions must be answered carefully and completely.

If you have a resume, attach it to the application. PLEASE TYPE OR PRINT.

## THIS FORM IS FOR INFORMATIONAL PURPOSES ONLY AND SHOULD NOT BE CONSIDERED AN OFFER OR INTENT OF EMPLOYMENT

Date		Position Seeking			
NameLast	E'a.		M		
Last	First	MI			
Social Security No.					
Address					
AddressNumber & Street		City	State	Zip	
Home Telephone No.		Business No.			
EDUCATION & TRAINING					
Name and Location of College			Date Attended		
Year of Graduation	Degree		Discipline		
Name & Location of High School			Year of Graduation		
List any other specialized training	ng which qualifies you	for the position	seeking:		
Military Branch of Service:		Dates of Service:			
List duties in the service, includi	ng schools and trainin	g:			

## Present/Last Employer: Address: \_\_\_\_\_ Date of Employment: \_\_\_\_\_\_ Title: \_\_\_\_\_ Reason for Leaving: Previous Employer:\_\_\_\_\_ Date of Employment: Title: Reason for Leaving: Previous Employer:\_\_\_\_ Address: Date of Employment: \_\_\_\_\_\_ Title: \_\_\_\_\_ Reason for Leaving: Are you a citizen and legally able to work in the U.S.?\_\_\_\_\_ VISA status, if applicable: Are you physically capable of performing the duties of the position applied for? If no, please explain: Do you have a valid NJ Driver's License? \_\_\_\_\_ License No. \_\_\_\_ ALL NEW HIRES MUST BE APPROVED BY THE STATE OF NEW JERSEY. ALL INFORMATION PROVIDED ON THIS APPLICATION AND ALL SUBSEQUENT INFORMATION PROVIDED TO OBTAIN EMPLOYMENT WITH THE CITY OF CAMDEN WILL ALSO BE SUBMITTED TO THE STATE OF NEW JERSEY. I have answered all questions to the best of my ability. If employed, I realize false information will be grounds for dismissal. I understand that upon an offer of employment, I will be requested to pass a physical examination, inclusive of drug screen, prior to employment. Signature Date

**WORK EXPERIENCE:** 

RETURN COMPLETED APPLICATION TO THE PERSONNEL OFFICE (RM. 405)