

City of Gloucester
 512 Monmouth Street · Gloucester City, NJ 08030
 Phone 856-456-0205; Fax 856-456-8030 · www.cityofgloucester.org

APPLICATION FOR EMPLOYMENT

All persons shall be afforded equal opportunity in all aspects of employment without regard to race, color, religion, political affiliation, national origin, disability, marital status, gender or age.
 All persons requiring reasonable accommodation to complete the application and/or interview process should notify the Clerk's Office

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

Position applied for: _____ Date of application: _____

Full Name _____ Home Phone _____
 Last First Middle

Address _____ Other Phone _____

City _____ State _____ Zip _____ Email Address _____

Type of Employment Desired FT ___ PT ___ Seasonal ___ Temporary ___
 May we contact you at work? Yes ___ No ___ Work Phone _____

Have you ever been employed by the City of Gloucester? _____
 If yes, please give dates and positions held _____

When will you be available for work? _____ Desired salary range _____

Employment History

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

Employer	Address	Phone ()
Date Started	Starting Salary	Starting Position
Date Ended	Ending Salary	Position upon leaving
Name and Title of Supervisor	Reason for Leaving	
Brief Description of Responsibilities		

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Date Started	Starting Salary	Starting Position
Date Ended	Ending Salary	Position upon leaving
Name and Title of Supervisor	Reason for Leaving	
Brief Description of Responsibilities		

Comments – (include 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)

Skills and Qualifications

Summarize any special training, skills, 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.

Computer Skills (Check appropriate boxes and indicate software titles with which 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	GPA/CLASS RANK	MAJOR	MINOR

REFERENCES

List three references, excluding 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 offices 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

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, resume 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 City of Gloucester City.

I understand that any offer of employment by the City of Gloucester City 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