



Franklin Township

475 Demott Lane, Somerset, NJ 08873

EMPLOYMENT APPLICATION

NAME			Date
ADDRESS		Telephone No.	
CITY		STATE	ZIP CODE
Circle Highest Grade Completed Grade School 1 2 3 4 5 6 7 8	High School 1 2 3 4	College 1 2 3 4	Highest Degree Granted
List any vocational school, colleges, and graduate school which you have attended:			
Name	Date Attended	Graduation	Major Area of Study
	From: To:	YES NO	
	From: To:	YES NO	
	From: To:	YES NO	
1. Are you a Franklin Township resident? For how many years?		2. Machine operated and/or special skills: Typing : YES NO Shorthand: YES NO	
3. Military Experience		Branch of Service	
		Dates in Service	
4. Valid Drivers License? YES NO		5. Has License ever been suspended? YES NO	
Valid Auto Insurance? YES NO		If yes, explain in detail. Attach additional sheet if necessary	
Valid A B C Class YES NO Class _____			
6. Professional Membership:			
7. Have you ever been employed by Franklin Township? YES NO		If yes, when From _____ To _____	
In what capacity?		Under what name?	
8. How did you learn about this position?			

WORK EXPERIENCE

Please attach resume / additional sheets if necessary

9. Do you have any references that are currently employed by Franklin Township? If so, give Name and Position.

Name and address of previous employer:	Title of your position
--	------------------------

Date employed in this position From _____ To _____	Reason for leaving
---	--------------------

<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time Number of hours per week	Describe your duties in detail

Name and address of previous employer:	Title of your position
--	------------------------

Date employed in this position From _____ To _____	Reason for leaving
---	--------------------

<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Number of hours per week	Describe your duties in detail

POSITION APPLYING FOR:

Other positions for which you feel you are qualified:

I certify that the information on this application is true and correct to the best of my knowledge. If I am appointed on the basis of any misstatement herein, I shall be subject to removal.

Signature _____ Date _____