

FOR OFFICE USE ONLY

Date Received: ____ / ____ / ____

Received By: _____



APPLICATION FOR EMPLOYMENT

Date: ____ / ____ / ____

The MPWC has a residency requirement which all employees are required to know and follow as a condition of employment. The Commission is committed to this policy and requires strict adherence. "Residency" within this policy is only achieved by an employee having their regular ordinary and permanent place of domicile within the territorial limits of Merchantville Borough and Pennsauken Township. Residency is more than a nominal domicile – it is the place which the employee regards as his or her home.

Name: _____

Email Address: _____

Full Home Address: _____

Best Phone Number: _____

Years at Address: _____

Position Applied For: _____

Salary Requirement: _____

Are you at least 17 years of age?

YES

NO

Have you ever been convicted of a crime?

YES

NO

If yes, please explain:

Are you willing to submit to a physical examination?

YES

NO

EDUCATION: Please indicate schools & highest grade/level completed, year of graduation and degrees.

High School: _____

College: _____

Vocational/Technical Schools: _____

Specialized training education or licenses: _____

Do you have a current, valid NJ Driver's License?

YES

NO

Has your license ever been revoked?

YES

NO

If yes, please explain:

REFERENCES:

Personal - Please give three (3) personal references (do not include relatives or former employers):

Name

Address

Phone Number

Employment – Please list former employers (most recent first):

Company Name: _____ Phone Number: _____

Address: _____

Salary: _____ Date Started: ____ / ____ / ____ Date Left: ____ / ____ / ____

Reason for Leaving: _____

Duties: _____

Company Name: _____ Phone Number: _____

Address: _____

Salary: _____ Date Started: ____ / ____ / ____ Date Left: ____ / ____ / ____

Reason for Leaving: _____

Duties: _____

Company Name: _____ Phone Number: _____

Address: _____

Salary: _____ Date Started: ____ / ____ / ____ Date Left: ____ / ____ / ____

Reason for Leaving: _____

Duties: _____

Company Name: _____ Phone Number: _____

Address: _____

Salary: _____ Date Started: ____ / ____ / ____ Date Left: ____ / ____ / ____

Reason for Leaving: _____

Duties: _____

Company Name: _____ Phone Number: _____

Address: _____

Salary: _____ Date Started: ____ / ____ / ____ Date Left: ____ / ____ / ____

Reason for Leaving: _____

Duties: _____

The statements which I have made in this application are true and complete. I hereby authorize the Merchantville-Pennsauken Water Commission to request information relative to this application from the employers and personal references which I have listed. I understand that, if I am hired, I will be requested to serve a probationary period of three months from the date my employment begins.

Applicant Signature

Date