TOWNSHIP OF MILLSTONE

PRE-EMPLOYMENT APPLICATION



In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, handicap or marital status.

		Date of A _J	oplication	
Position(s) Applied	1 For			
Referral Source	☐ Advertisement	☐ Friend	☐ Relative	
	☐ Other			
Name	First	Social S	ecurity No	
Lusi	T trst	1711		
Address		City	State	Zip
Telephone No				
Have you filed an a	application or been en	aployed here before?	□ Yes □ No	
If yes, list dates:				
Are you a citizen	of the United States	or an alien lawfully per	mitted to work in the U.S	S.? □ Yes □No
Are you available to	work? ☐ Full Time	□ Par	t Time	
Are any of your fri	iends or relatives emp	ployed by the Township	of Millstone? Yes	□ No
Are you on lay-off	and subject to recall	? □Yes □	J No	
Drivers License	□Yes	□No		
Commercial Driver	's License □Yes	□No	Class Endorsement	
Driver's License No	D	State	of Issue	
Expiration Date				

Millstone Township prohibits smoking in all Township Buildings, facilities as well as Township owned vehicles.

Do you have any mer duties?	ital, medical impairmen	t or disability which mi	ght limit your ab	ility to perform job-related
	□Yes	\square No		
If yes, please explain				
Do you require Healt	h Benefits? □Yes	□No		
Single Memb	per/Spouse Mem	aber/Child Family		
Have you brought any	y law suits against any r □Yes	municipality at any time	?	
If yes, please explain				
Are you a Veteran?	□Yes	□No	Serial No	
If yes, what branch o	of military service?			Rank
		lress, and Phone No. of		s not related to you.
Education:				
What is the highest y	vear of school complete	ed?		
Describe specialized	training, apprenticesh	ip, skills and extracurr	cular activities.	

Employment Experience

List each job held. Start with your present or most recent job. Include military service assignments and volunteer activities.

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AGREEMENT

I certify that answers given within are true and complete to the best of my knowledge.

In the event of my employment, I understand that false or misleading information given in my application or interview (s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Township of Millstone.

In consideration of my employment, I agree my employment and compensation can be terminated with or without cause and with or without notice at anytime at the option of Millstone Township or myself.

I also understand that a valid New Jersey Driver's License is a condition of employment with Millstone Township. Loss of driving privileges can result in termination of employment.

Signature of Applicant	Date

CONSENT TO PROCUREMENT OF CONSUMER CREDIT REPORT

I understand that, as a condition of my consideration for employment with the Township of Millstone, or as a condition of my continued employment with the Township of Millstone, the Township of Millstone may obtain a consumer report that includes, but is not limited to, my creditworthiness or similar characteristics, employment and education verifications, social security verification, criminal and civil history, personal interviews, DMV records, any other public records and any other information bearing on my credit standing, credit capacity, character, general reputation, personal characteristics and trustworthiness.

I hereby authorize and consent to the Township of Millstone's procurement of such a report. I understand that, pursuant to the federal Fair Credit Reporting Act, the Township of Millstone will provide me with a copy of any such report if the information contained in such report is, in any way, to be used in making a decision regarding my fitness for employment with the Township of Millstone. I further understand that such report will be made available to me prior to any such decision being made, along with the name and address of the reporting agency that produced the report.

Signature of Applicant or Employee	Date
Printed Name of Applicant or Employee	

Applicant's Statement – READ CAREFULLY BEFORE SIGNING - IF YOU ARE HIRED, THE FOLLOWING BECOMES PART OF YOUR OFFICIAL EMPLOYMENT RECORD AND PERSONNEL FILE.

I understand this employment application is not a promise of an offer of employment. I further understand that should I receive and accept an offer of employment, my employment does not constitute any form of contract, implied or expressed, and such employment will be terminable at will either by myself or the Township of Millstone upon notice of one party to the other. My continued employment would be dependent on satisfactory performance and continued need for my services as determined by the Township of Millstone.

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for are grounds for a refusal to offer employment or a cause of dismissal if hired.

I AGREE THAT ANY CLAIM OR LAWSUIT RELATING TO MY SERVICE WITH THE TOWNSHIP OF MILLSTONE MUST BE FILED NO MORE THAN SIX (6) MONTHS AFTER THE DATE OF THE EMPLOYMENT ACTION THAT IS THE SUBJECT OF THE CLAIM OR LAWSUIT, WITH THE ONLY EXCEPTION BEING CLAIMS SUBJECT TO INITIAL FILING WITH THE EQUAL EMPLOYMENT OPPORTUNITY COMMISSION OF THE UNITED STATES, IN WHICH CASE I AGREE THE STATUTE OF LIMITATIONS UNDER THE APPLICABLE LAW WILL APPLY. I WAIVE ANY STATUTE OF LIMITATIONS TO THE CONTRARY.

I WAIVE MY RIGHT TO TRIAL BY JURY IN ANY LITIGATION ARISING OUT OF, OR RELATING TO, MY EMPLOYMENT WITH THE TOWNSHIP OF MILLSTONE, INCLUDING CLAIMS OF WRONGFUL OR RETALIATORY DISCIPLINE OR DISCHARGE; CLAIMS OF SEXUAL, SEXUAL ORIENTATION, RELIGIOUS, PREGNANCY, DISCRIMINATION, NATIONAL ORIGIN, OR GENETIC INFORMATION; CLAIMS UNDER TITLE VII OF THE CIVIL RIGHTS ACT, TITLE IX, AMERICANS WITH DISABILITIES ACT, AGE DISCRIMINATION IN EMPLOYMENT ACT, EMPLOYEE RETIREMENT INCOME SECURITY ACT, FAIR LABOR STANDARDS ACT, AND ALL OTHER APPLICABLE NON-DISCRIMINATION, EMPLOYMENT OR WAGE AND HOUR STATUTE, CLAIMS FOR BENEFITS (EXCEPT WHERE AN EMPLOYEE BENEFIT OR RETIREMENT PLAN SPECIFIES THAT ITS CLAIMS PROCEDURES SHALL CULMINATE IN AN ARBITRATION DIFFERENT FROM THIS ONE), AND CLAIMS FOR VIOLATION OF ANY STATE, FEDERAL, OR OTHER GOVERNMENTAL LAW, STATUTE, REGULATION OR ORDINANCE, EXCEPT WORKER'S COMPENSATION OR UNEMPLOYMENT COMPENSATION BENEFIT CLAIMS WHICH ARE NOT COVERED BY THIS AGREEMENT.

I agree/acknowledge that I have had a reasonable opportunity to inspect this Agreement and ask any and all questions I may have had regarding this Agreement, and that said questions, if any, were answered to my full and complete satisfaction.

I hereby sign this Agreement volun	ntarily, knowing	ly, and free from duress and coercion.
Signature of Applicant	Date	
Printed Name of Applicant		