

Town of Boonton

Employment Application

Please send application to:

**Administration – Town of Boonton
100 Washington Street
Boonton, NJ 07005**



**Town of Boonton Application for Employment
Pre-Employment Questionnaire**

PERSONAL INFORMATION

Last Name	First Name	MI	Social Security Number
Present Address	Town	State	Zip
Permanent Address	Town	State	Zip
Home Telephone Number	Secondary Telephone Number	Are you over 18 years of age?	

DESIRED EMPLOYMENT

Position	Date you can start	Salary desired
Are you employed now? () Yes () No	May we contact your present employer?	Have you ever applied for employment with the Town of Boonton before? () Yes () No
State the date you last applied for employment with Town of Boonton	What position(s) did you apply for then?	

EDUCATION AND SKILLS

School Level	Name & Address of School	Years Attended	Did you Graduate?	Degree/License
Grammar School				
High School				
College				
Trade/ Business School				

The Town of Boonton is an equal opportunity employer

GENERAL INFORMATION

Subjects of Special Study or Research Work	
Special Training	
Special Skills	
What vehicles can you operate?	Driver's License Number
Do you speak any languages other than English?	Are you available to work () Full Time () Part Time () Temporary

MILITARY RECORD

Branch of Service	Date Entered	Date Discharged
Type of Discharge	Job Title/MOS	Rank at Discharge

CRIMINAL RECORD

Have you ever been convicted of a crime? () Yes () No
If Yes, explain (will not necessarily exclude you from employment consideration)

FORMER EMPLOYERS

Most Recent One First

Name of Present or Last Employer:				
Address:	Town:	State	Zip	Phone
Starting Date	Leaving Date	Job Title		Salary
Description of Work:				
Reason for Leaving:				

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Address:	Town:	State	Zip	Phone
Starting Date	Leaving Date	Job Title		Salary
Description of Work:				
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Address:	Town:	State	Zip	Phone
Starting Date	Leaving Date	Job Title		Salary
Description of Work:				
Reason for Leaving:				

REFERENCES

Below, provide the name of three persons you are not related to whom you have known at least one year.

Name	Company Name (if applicable) and Address	Telephone	Years Known
1			
2			
3			

AUTHORIZATION

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION MAY BE GROUNDS FOR DISMISSAL.

I AUTHORIZE THE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN. I FURTHER AUTHORIZE THE REFERENCES AND EMPLOYERS LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE THE COMPANY FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM SAME.

I ALSO UNDERSTAND AND AGREE THAT NO REPRESENTATIVE OF THE TOWN OF BOONTON HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING, UNLESS IT IS IN WRITING AND SIGNED BY THE AUTHORIZED TOWN REPRESENTATIVE.

Date

Signature of Applicant

Date

Signature of Witness

(The Town of Boonton is a Civil Service community and all applicants should be familiar with the prerequisites and requirements of the Civil Service System and the examination process).

NEW JERSEY ADMINISTRATIVE CODE – TITLE 4 – CIVIL SERVICE

SUBCHAPTER 6. EXAMINATION AND SELECTION – DISQUALIFICATION AND APPEALS 4A:4-6.1

Examination and selection disqualification

(a) A person may be denied examination eligibility or appointment when he or she:

1. Lacks the job requirements;
2. Is ineligible, by law, for employment in the title;
3. Is physically or psychologically unfit to perform effectively the duties of the title. However, an injury incurred in the armed forces shall not be considered a disqualification unless the Commissioner considers the condition incapacitating;
4. Has failed to pass examination procedures;
5. Has been removed from the public service for disciplinary reasons after an opportunity for a hearing;
6. Has made a false statement of any material fact or attempted any deception or fraud in any part of the selection or appointment process;
7. Has a prior employment history which relates adversely to the title, or
8. Other sufficient reasons.

(b) Except where precluded by law, a person who is disqualified pursuant to (a) 5 and 7 above may, for good cause be admitted to an examination and, with the appointing authority's concurrence, certified for appointment.

(c) Any action specified in this section shall be effective upon receipt of written notice of disqualification.

4A:4-6.2 Actions against disqualified persons

(a) A disqualification under N.J.A.C. 4A:4-6.1 may result in:

1. Rejection of examination application;
2. Refusal to test an individual;
3. Refusal to place a candidate's name on an eligible list;
4. Refusal to certify an eligible's name;
5. Removal of an eligible's name from the eligible list;
6. Removal from employment; or
7. Other appropriate action.

(b) Major disciplinary procedures shall be applicable to removal of an employee who is permanent or serving in a working test period.

APPLICANT: READ AND SIGN BELOW

The information provided by me in this application for employment is true and complete to the best of my knowledge. I understand that if I am employed, any false statements will be considered as cause for possible dismissal. You are hereby authorized to conduct any investigation of my personal history and/or credit and financial records employing investigative or credit agencies or bureaus of your choice subject to the provisions of the Fair Credit Reporting Act. I understand that a pre-employment physical is required.

Signature of Applicant