

**THE OCEAN COUNTY UTILITIES AUTHORITY
APPLICATION FOR EMPLOYMENT**

501 Hickory Lane	PO Box P	Bayville, NJ 08721
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We consider applications for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, handicap, or any other legally protected status.

Please print or type and complete all sections.

Position Applied for: _____ Date: _____

Name: _____ Social Security No. _____

Present Address: _____ Phone No: _____
 _____ Years _____

Previous Address: _____
 _____ Years _____

	YES	NO
1. Are you over 18 years old? If under 18, state birth date _____	_____	_____
2. Do you have a legal right to work in this country? (Proof will be required)	_____	_____
3. Do you possess a current valid NJ Driver's License? Endorsement(s) _____ Class _____	_____	_____
4. Has your license been suspended or revoked? If yes, explain _____	_____	_____
5. Have you ever been convicted of a felony? If yes, explain _____	_____	_____
6. Have you ever been employed by us before? If yes, from _____ to _____	_____	_____
7. List relatives or friends working for us. Name _____ Relationship _____ Name _____ Relationship _____		
8. Are you willing to work: Day only _____ Any shift _____		
9. Will you accept: Full time _____ Part-time _____ Temporary _____		

EDUCATION

10. Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12

11. Circle number of years of post high school education: 1 2 3 4 5 6 7 8

	Name & location of high school and colleges	Degree	Major
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____

12. Other training or education _____

13. When will you be available to start: Month____ Day____ Year____

14. How did you hear of us? _____
If newspaper, which one: _____

Please describe all paid military and past employment experiences starting with current/most recent. We will contact your previous employer(s) for business references.

Job Title _____ Duties _____
Employer _____
Street Address _____
City,State,ZipCode _____
Reason for Leaving _____
Salary: Start _____ Finish _____
Dates: Start _____ Finish _____
Supervisor _____
Type of Business _____ Phone No. _____

Job Title _____ Duties _____
Employer _____
Street Address _____
City,State,ZipCode _____
Reason for Leaving _____
Salary: Start _____ Finish _____
Dates: Start _____ Finish _____
Supervisor _____
Type of Business _____ Phone No. _____

Job Title _____ Duties _____
Employer _____
Street Address _____
City,State,ZipCode _____
Reason for Leaving _____
Salary: Start _____ Finish _____
Dates: Start _____ Finish _____
Supervisor _____
Type of Business _____ Phone No. _____

15. May we contact your current employer? Yes_____ No_____

Signature

16. Detail any experience, skills, or qualifications which you feel especially suits you for work with this Authority: _____

17. Have you had any job-related training in the military? Yes___ No___

If yes, explain _____

List names and addresses of personal references not related to you that we may contact:

(Please do not duplicate any references listed under military and past employment experiences)

Name _____ Street _____
City,State,ZipCode _____ Phone _____

Name _____ Street _____
City,State,ZipCode _____ Phone _____

Name _____ Street _____
City,State,ZipCode _____ Phone _____

The facts set forth in this Application for Employment are true and complete. I understand that if employed, false statements on this form shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history.

Signature

Date

PERSONNEL DEPARTMENT ONLY

Interviewed: Yes___ No___ Date(s): _____

Interviewed By: _____

Employed: Yes___ No___ Dates: _____

Position: _____ Division: _____ Rate: _____

Notes: _____

APPLICANT IDENTIFICATION RECORD

Anti-Discrimination Notice: It is unlawful employment practice for an employer to fail or refuse to hire or discharge any individual, or otherwise discriminate against any individual with respect to that individual’s terms and conditions of employment, because of individual’s race, color, religion, sex, or national origin.

The Ocean County Utilities Authority is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, the Authority invites applicants and employees to self-identify their gender, race and ethnicity.

Submission of this information will be kept confidential and may be used in accordance with the provisions of applicable laws, executive orders and regulations, including those that require the information summarized and reported to the federal or state government for civil rights enforcement. When reported, data will not identify any specific individual. This information will have no bearing on your consideration for the position for which you are applying. The information will not be kept with your employment application.

1. Position Applying for (specific): _____

2. Date of Birth: ____ / ____ / ____ Gender: Male Female

3. Please indicate the group you most identify with:

- American Indian or Alaska Native
All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.
- Asian or Pacific Islander
All persons having origins in any of the original peoples of Far East, South East, the Indian Subcontinent, or the Pacific Islands (for example China, India, Japan, Korea, the Philippine Islands, Samoa, etc. and who maintain cultural identification through tribal affiliation or community recognition, etc.)
- Black or African American
(not of Hispanic or Latino origin): All persons having origins in any of the Black racial groups of Africa.
- Hispanic or Latino
All persons of Mexican, Puerto Rican, Cuban, Central or South America, or other Spanish culture or origin, regardless of race.
- White
(not of Hispanic or Latino origin): All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- Other: _____