# OLD BRIDGE PUBLIC LIBRARY ONE OLD BRIDGE PLAZA OLD BRIDGE, NEW JERSEY 08857 (732) 721-5600

# **Employment Application**

Date of Application:	Position Sought:					
		Full-time	Part-time			
	PERSONAL INFORMAT (please print)	TION				
Last Name	First Name		Middle Initial			
Address						
City:						
Telephone Daytime:		Evening:				
	HEALTH					
Do you have any physical disability a	affecting speech, sight or mol	oility?				
If yes, please explain:						
Are you able to lift and carry loads v	weighing more than twenty-fi	ive (25) pounds? _				
What is the present condition of you	ur health?					
	EDUCATION					
Highest Grade Completed						
Last School Attended						
Degree(s) Earned & Graduation Date	e					
Other Education or Training						
Have you ever worked in a public se	ervice or retail position?					
If so, where and when?						

### **VOLUNTEER WORK**

Please list any volunteer activities you are (or have been) involved in:				
SKILLS				
Do you have any computer experience? If so, what kind of computer software have you used?				
What other equipment or office machines can you operate?				
Describe any skills or expertise you have which might be useful in the library setting:				
Do you speak or read any language in addition to English?				
COMPLIANCE WITH MUNICIPAL REGULATION 002-2004  I certify I am not related to any Township-elected officeholder, Department Head, Township Clerk, Chief Financial Officer, Tax Collector or Treasurer. These relations are defined as brother, sister, husband, wife, life partner, son, daughter, ward, son-in-law, daughter-in-law, father, mother, father-in-law, mother-in-law, grandmother or grandfather.				
Signature & Date				
Have you ever been convicted of a crime? No Yes  If yes, please explain:				
[ ] Please check here if you are related to a Library Board Trustee, an Old Bridge Library Employee, or an employee of Old Bridge Township.				
APPLICANT'S CERTIFICATION				
I certify that the information I have supplied on this application is accurate and complete. The Old Bridge				

Public Library is authorized to contact all my previous employers to verify the accuracy of information provided here, my character, habits, and skills or to seek any other information about me that will lead to an understanding of my qualifications and suitability for this position.

\_\_\_\_\_\_Signature & Date

### RECORD OF EMPLOYMENT

Please list all jobs and positions you have held. Please include an explanation for any time you spent unemployed even for short periods of time. All present and former employers will be contacted unless you specify that they should not be. Any material inaccuracies on this form may be considered sufficient cause to disqualify your application.

### LIST MOST CURRENT POSITION FIRST

Organization of Company	Name of Supervisor	Dates of Employment	Position Held	Nature of Work	Salary	Reason for Leaving

## **OFFICE USE ONLY**

Name & Position of Reference	Remarks	Date

Other pertinent notes: