



Township of Maplewood

574 Maplewood, New Jersey 07040

Telephone (973) 762-8120

Department of Community Services APPLICATION FOR EMPLOYMENT

Please read carefully before you sign this application. Application must be completed in full even if attaching a resume.

All applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, sexual orientation, marital status, ancestry, age, veteran status, disability, eligibility for service in the armed forces or other non-merit factors.

PLEASE PRINT USING BALLPOINT PEN OR FILL COMPLETE IN WINDOW ON A DESKTOP OR LAPTOP

Date of Application: _____

Interested in (select all that apply):

- _____ Camp Staff
 - _____ Kids Camp Counselor
 - _____ Kids Camp Director (Experienced)
 - _____ Art Camp Director (Experienced)
 - _____ Art Camp Counselor
- _____ Fitness Instructor
- _____ Park Attendant
- _____ Building Attendant
- _____ Pool Staff
 - _____ Front Desk
 - _____ Maintenance Staff
 - _____ Custodial Staff
 - _____ Pool Manager
 - _____ Aquatic Fitness Instructor
 - _____ Swim Team Coach (must be CPR certified)
 - _____ Lifeguard

PERSONAL INFORMATION

FULL NAME (LAST FIRST MIDDLE) _____

PRESENT STREET ADDRESS _____

CITY, STATE ZIP _____

DAYTIME PHONE # (____) _____ EVENING PHONE # (____) _____

EMAIL ADDRESS: _____

HAVE YOU EVER BEEN EMPLOYED BY THE TOWNSHIP BEFORE? YES NO

IF YES, WHEN? (LIST DATES AND POSITIONS) _____

HOW WERE YOU REFERRED TO THE TOWNSHIP FOR EMPLOYMENT? _____

GENERAL INFORMATION

ARE YOU 18 YEARS OF AGE OR OLDER? YES NO

IF YOU ARE UNDER AGE 18, CAN YOU SUPPLY WORKING PAPERS? YES NO

HAVE YOU EVER BEEN DISCHARGED FROM ANY EMPLOYMENT OR ASKED TO RESIGN? YES NO

IF YES, PLEASE EXPLAIN _____

FILL OUT THE FOLLOWING ONLY IF APPLYING FOR A POSITION WHICH REQUIRES A DRIVER'S LICENSE.

DRIVER'S LICENSE # _____ STATE _____

SCHEDULE AVAILABILITY & DESIRED SALARY

A. DATES AVAILABLE FOR EMPLOYMENT: FROM _____ TO _____

ALL CAMP STAFF WILL BE REQUIRED TO WORK THE FULL EIGHT WEEKS. VACATION DAYS WILL NOT BE GRANTED. EXCUSED ABSENCES MAY BE GRANTED, SUCH AS: COLLEGE ORIENTATION AND/OR DOCTOR'S APPOINTMENT. PROPER PAPERWORK IS REQUIRED FOR THESE REQUESTS WITH APPROVAL FROM CAMP DIRECTOR.

I UNDERSTAND AND WILL BE AVAILABLE FOR THE FULL EIGHT WEEKS OF THE PROGRAM

B. ARE YOU AVAILABLE TO WORK EARLY WEEKDAY MORNINGS? YES NO

C. ARE YOU AVAILABLE TO WORK WEEKDAY EVENINGS YES NO

D. ARE YOU AVAILABLE TO WORK ON THE WEEKENDS YES NO

NOTE: WORK SCHEDULES ARE BASED UPON THE NEEDS OF THE EMPLOYER AND MAY BE SUBJECT TO CHANGE ON A WEEKLY BASIS

WAGE/SALARY EXPECTED _____

EDUCATION

NAME OF SCHOOL: _____

CHECK ONE: HIGH SCHOOL UNDERGRADUATE GRADUATE STUDENT

EXPECTED YEAR OF GRADUATION: _____

MAJOR: _____

(COLLEGE/UNIVERSITY STUDNETS ONLY)

EMPLOYMENT HISTORY

NOTE: CAN INCLUDE LEADERSHIP/VOLUNTEER EXPERIENCE

NAME OF ORGANIZATION OR EMPLOYER: _____
ADDRESS: _____ PHONE: _____
DATE OF INVOLVEMENT: (FROM) _____ (TO): _____
SUPERVISOR NAME: _____ JOB TITLE: _____
DUTIES: _____

NAME OF ORGANIZATION OR EMPLOYER: _____
ADDRESS: _____ PHONE: _____
DATE OF INVOLVEMENT: (FROM) _____ (TO): _____
SUPERVISOR NAME: _____ JOB TITLE: _____
DUTIES: _____

NAME OF ORGANIZATION OR EMPLOYER: _____
ADDRESS: _____ PHONE: _____
DATE OF INVOLVEMENT: (FROM) _____ (TO): _____
SUPERVISOR NAME: _____ JOB TITLE: _____
DUTIES: _____

PLEASE ANSWER THE FOLLOWING QUESTIONS:

1. WHAT INTERESTS YOU IN A SUMMER JOB WITH THE TOWNSHIP OF MAPLEWOOD?

