



MORRIS-UNION JOINTURE COMMISSION
340 Central Avenue, New Providence, NJ 07974
(908) 464-7625
www.mujs.org

APPLICATION FOR EMPLOYMENT

POSITION APPLIED FOR _____

M _____

Address _____

Home Phone Number _____

Cell Phone Number _____

Work Phone Number _____

E-Mail Address _____

Date: _____

Signature

Name _____
Last First Middle Maiden Name

Present Address _____
Street City State Zip Code

Permanent Address _____

Telephone Number Home _____ Cell _____ Work _____

E-Mail Address _____

Social Security Number _____

You need not provide your social security number at this time, but it is requested as a convenience to the Commission in assembling personal data relating to your application for employment. You will, however, be required to provide your social security number if you accept an offer of employment. Your social security number will be used to satisfy requirements under the Internal Revenue and Social Security Acts of the United States. Also, the Commission may use your social security number for the purpose of processing a request for criminal history record.

Have you ever applied for employment with the Morris-Union Jointure Commission? Yes _____ No _____

If yes, please indicate _____.
month/year

Have you ever been employed by the Morris-Union Jointure Commission?

Yes _____ No _____

If yes, please indicate dates of employment and position held. _____

Are you related to any employee who is currently or who has been employed by the Morris-Union Jointure Commission? Yes _____ No _____

If yes, please indicate the employee's name and the nature of your relationship. _____

Are you related to any student who is currently or who has been a student at any of the Developmental Learning Centers? Yes _____ No _____

If yes, please indicate the nature of your relationship. _____

Have you ever been convicted of a violation of law other than a minor traffic offense?

Yes _____ No _____

If yes, please explain. _____

Are you able to satisfactorily perform the essential elements of the position for which you are applying?

Yes _____ No _____ If no, please explain. _____

EDUCATIONAL BACKGROUND: (List highest level first.)

School	Degree, Diploma or Certificate	Major or Program
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Other _____

PREVIOUS WORK EXPERIENCE: (List most recent experience first.)

From	To	Employer	Address	Title	Salary
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

SKILLS: (Please rate the appropriate skills F= Fair, G=Good, E=Excellent, N/A = Not applicable)

Typing _____ Operate a dictating/transcribing machine _____ Accounting/Bookkeeping _____

Records Management _____ Research on the Internet _____ Organize Meetings _____

Microsoft Office Package: Word _____ Excel _____ Power Point _____ Access (data entry) _____

Access (developing queries/database programming) _____ Email _____ Other _____

REFERENCES

Please list three professional references (particularly individuals who have supervised your work) who would have first-hand knowledge of your professional abilities and character.

Name/Title	Address	Phone
1.	_____	_____
2.	_____	_____
3.	_____	_____

May we contact these references? _____

I certify the above information to be an accurate and correct statement of my personal and employment history. I hereby grant permission to the Morris-Union Jointure Commission to contact my previous employers and professional references listed above for verification of information provided in this application.

Signature

Date

Please mail application to:

Morris-Union Jointure Commission

340 Central Avenue, New Providence, NJ 07974
(908) 464-7625
www.muja.org

Affirmative Action/Equal Opportunity Employer