



## TOWNSHIP OF WEST ORANGE APPLICATION FOR EMPLOYMENT

***(NOTE: This next section for driver's license information (including CDL License) is only required when the job title you are seeking requires a driver's license.)***

11. Driver's License # \_\_\_\_\_ State \_\_\_\_\_

12. Has your driver's license privileges ever been suspended/revoked in this or any other state?  Yes  No

13. If yes, provide details:

14. Do you have a Commercial Driver's License (CDL)?  Yes  No

If yes, list endorsements: \_\_\_\_\_

15. Have you ever received a **moving** violation traffic ticket?  Yes  No

If yes, provide information on each and every summons:

Date	Charge/Violation	Jurisdiction	Penalty

16. Have you ever previously applied for a Township of WO position?  Yes  No

17. If yes, provide details:



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21. List all current and former employers, including full-time, part-time, and seasonal. List employers in reverse chronological order beginning with your present employer and work backwards. If you were discharged or were requested to resign by an employer, answer so in the Reason for Leaving section

a. Current Employer: \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

Telephone # \_\_\_\_\_  Full Time  Part Time

Employed from: \_\_\_\_\_ to \_\_\_\_\_

Position/Title \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

Hours per week \_\_\_\_\_

Reason for leaving \_\_\_\_\_

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b. Employer #2: \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

Telephone # \_\_\_\_\_  Full Time  Part Time

Employed from: \_\_\_\_\_ to \_\_\_\_\_

Position/Title \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

Hours per week \_\_\_\_\_

Reason for leaving \_\_\_\_\_

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c. Employer #3: \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

Telephone # \_\_\_\_\_  Full Time  Part Time

Employed from: \_\_\_\_\_ to \_\_\_\_\_

Position/Title \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

Hours per week \_\_\_\_\_

Reason for leaving \_\_\_\_\_

d. Employer #4: \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

Telephone # \_\_\_\_\_  Full Time  Part Time

Employed from: \_\_\_\_\_ to \_\_\_\_\_

Position/Title \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

Hours per week \_\_\_\_\_

Reason for leaving \_\_\_\_\_

e. Employer #5: \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

Telephone # \_\_\_\_\_  Full Time  Part Time

Employed from: \_\_\_\_\_ to \_\_\_\_\_

Position/Title \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

Hours per week \_\_\_\_\_

Reason for leaving \_\_\_\_\_

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***I understand that the Township of West Orange is an “at will” employer consistent with applicable Federal and State law, including the New Jersey Civil Service Act, and New Jersey Department of Personnel Rules.***

***I understand that employment with the Township of West Orange is not for a fixed term or definite period and may be terminated at the will of either party, with or without cause, and without prior notice, consistent with applicable law.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For Township Use Only: \_\_\_\_\_

Interviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_