



Borough of Milltown
 39 Washington Ave.
 Milltown, NJ 08850
 (732)828-2100
 clerk@milltownboro.com

Municipal Employment Application

Applicants who need an accommodation in the application or interview process are asked to make a request by contacting the Borough Of Milltown Clerk's Office

Title of Position Applying For: _____

Date Available for Employment _____

I. Personal Data

Name _____
Last Name First Name Middle Name

Address _____
Street Address Apt/ Suite City State Zip

Cell Phone _____ Home Phone _____ E-mail _____

Are you a United States Citizen or do you have an entry permit which allows you to lawfully work in the United States? Yes No

Are you 18 years of Age or Older? Yes No

II. Educational Preparation and/or Training

Please list High School, College, University or Trade School Completed. (List Most Recent First)

1.	_____	_____	_____	_____
	<small>Name of School</small>	<small>Major</small>	<small>Minor</small>	<small>Type of Degree</small>
	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<small>Location of School</small>	<small># of Years Completed</small>	<small>Did you Graduate?</small>	
2.	_____	_____	_____	_____
	<small>Name of School</small>	<small>Major</small>	<small>Minor</small>	<small>Type of Degree</small>
	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<small>Location of School</small>	<small># of Years Completed</small>	<small>Did you Graduate?</small>	
3.	_____	_____	_____	_____
	<small>Name of School</small>	<small>Major</small>	<small>Minor</small>	<small>Type of Degree</small>
	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<small>Location of School</small>	<small># of Years Completed</small>	<small>Did you Graduate?</small>	

III. Work History

1.	_____	_____	_____	_____
	<small>Name of Employer</small>	<small>From (MM/YYYY)</small>	<small>To (MM/YYYY)</small>	<small>Telephone #</small>
	_____	_____	_____	_____
	<small>Address of Employer</small>	<small>Position</small>	<small>Reason for Leaving</small>	
	_____	_____	_____	
	<small>Name of Supervisor</small>	<small>Title of Supervisor</small>		
2.	_____	_____	_____	_____
	<small>Name of Employer</small>	<small>From (MM/YYYY)</small>	<small>To (MM/YYYY)</small>	<small>Telephone #</small>
	_____	_____	_____	_____
	<small>Address of Employer</small>	<small>Position</small>	<small>Reason for Leaving</small>	
	_____	_____	_____	
	<small>Name of Supervisor</small>	<small>Title of Supervisor</small>		
3.	_____	_____	_____	_____
	<small>Name of Employer</small>	<small>From (MM/YYYY)</small>	<small>To (MM/YYYY)</small>	<small>Telephone #</small>
	_____	_____	_____	_____
	<small>Address of Employer</small>	<small>Position</small>	<small>Reason for Leaving</small>	
	_____	_____	_____	
	<small>Name of Supervisor</small>	<small>Title of Supervisor</small>		

IV. Other Skills/ Proficiencies

Please check any programs in which you are proficient:

- Microsoft Word Microsoft Excel Microsoft Outlook
- Microsoft Publisher Microsoft Access Edmunds

Please list any other computer software programs in which you are proficient

V. References

(Please omit relatives)

1.

Name of Reference	Relation	Time Known
Address of Reference	Position	Phone Number

2.

Name of Reference	Relation	Time Known
Address of Reference	Position	Phone Number

3.

Name of Reference	Relation	Time Known
Address of Reference	Position	Phone Number

VI. Personal Statement

Include your experience, talents or special interests, which in your estimation will contribute to your success in the position for which you are making an application

VII. Additional Items that may be submitted

- Cover Letter Resume Certificates of Completion under DCA Licensing
- Certificates of Completion for Training Programs Copies of Licenses Held

By signing this application you are affirming that all information provided is true and accurate.

Signature	Printed Name	Date
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