**VACANCY FOR THE TOWNSHIP OF LAKEWOOD**
**DEPARTMENT OF PUBLIC WORK – RECREATION DIVISION**
**SUMMER RECREATION BUS DRIVER**

There is a vacancy for the job title of Summer Recreation Bus Driver for the Township of Lakewood Department of Public Works, Recreation Division.

*This is a Seasonal Position, for the time period of July 5, 2016 – August 19, 2016*

The hours for this position are Monday thru Friday, 8:30am – 3:30pm.

The hourly salary for this position is $15.00 per hour.

Anyone interested must submit an application **by Tuesday, May 31, 2016** to:

Mr. Patrick Donnelly
Director of Public Works
Township of Lakewood
Department of Public Works
1 America Way
Lakewood, NJ  08701
Fax: (732) 367-5401

*There is a job application attached to this job announcement for your use.*

# APPLICATION FOR EMPLOYMENT

**Township of Lakewood**

The Township of Lakewood is an Equal Opportunity Employer.
This form has been designed to comply with State & Federal fair employment practice laws prohibiting employment discrimination.

## APPLICANT INFORMATION

| Last Name | First | M.I. | Date |
|---|---|---|---|
| | | | |

| Street Address | Apartment/Unit # |
|---|---|
| | |

| City | State | ZIP |
|---|---|---|
| | | |

| Phone | E-mail Address |
|---|---|
| | |

| Date Available | Desired Salary |
|---|---|
| | |

**Position Applied for**

| Are you a citizen of the United States? | YES ☐ | NO ☐ | If no, are you authorized to work in the U.S.? | YES ☐ | NO ☐ |
|---|---|---|---|---|---|
| Have you ever worked for Lakewood Township? | YES ☐ | NO ☐ | If so, when? | | |
| Do you possess a valid NJ Driver's License? | YES ☐ | NO ☐ | | | |

## EDUCATION

| High School | | | Address | | | | |
|---|---|---|---|---|---|---|---|
| From | To | Did you graduate? | YES ☐ | NO ☐ | Subjects Studied | | Degree? YES☐ |

| College | | | Address | | | | |
|---|---|---|---|---|---|---|---|
| From | To | Did you graduate? | YES ☐ | NO ☐ | Subjects Studied | | Degree? YES☐ |

| Other | | | Address | | | | |
|---|---|---|---|---|---|---|---|
| From | To | Did you graduate? | YES ☐ | NO ☐ | Subjects Studied | | Degree? YES☐ |

## REFERENCES

*Please give the names of three (3) persons not related to you, whom you have known at least one (1) year*

| Full Name | Relationship |
|---|---|
| Company | Phone |
| Address | |

| Full Name | Relationship |
|---|---|
| Company | Phone |
| Address | |

| Full Name | Relationship |
|---|---|
| Company | Phone |
| Address | |

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## PREVIOUS EMPLOYMENT *LIST BELOW CURRENT AND FORMER EMPLOYERS, STARTING WITH LAST EMPLOYER FIRST*

| Company | | Phone | |
|---|---|---|---|
| Address | | Supervisor | |
| Job Title | Starting Salary $ | | Ending Salary $ |
| Responsibilities | | | |
| From | To | Reason for Leaving | |
| May we contact your previous supervisor for a reference? | YES ☐ | NO ☐ | |

| Company | | Phone | |
|---|---|---|---|
| Address | | Supervisor | |
| Job Title | Starting Salary $ | | Ending Salary $ |
| Responsibilities | | | |
| From | To | Reason for Leaving | |
| May we contact your previous supervisor for a reference? | YES ☐ | NO ☐ | |

| Company | | Phone | |
|---|---|---|---|
| Address | | Supervisor | |
| Job Title | Starting Salary $ | | Ending Salary $ |
| Responsibilities | | | |
| From | To | Reason for Leaving | |
| May we contact your previous supervisor for a reference? | YES ☐ | NO ☐ | |

## MILITARY SERVICE

| Branch | | From: | To: |
|---|---|---|---|
| Rank at Discharge: | | Type of Discharge: | |
| If other than honorable, explain: | | | |

## GENERAL

Subjects of special study or research work:

## DISCLAIMER AND SIGNATURE

I CERTIFY THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL. I ALSO AM AWARE THAT EMPLOYMENT IS SUBJECT TO A PHYSICAL EXAMINATION.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU.

I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS SUBJECT TO THE RULES AND REGULATIONS OF THE TOWNSHIP OF LAKEWOOD AND NJ CIVIL SERVICE COMMISSION.

| Signature | Date |
|---|---|