



MONTAGUE TOWNSHIP SCHOOL DISTRICT

475 Route 206

Montague, New Jersey 07827

Phone: 973-293-7131/Fax: 973-293-3391

www.montagueschool.org



Email Address: _____ Date of Application: _____

Position Applied For: _____ Full Time: _____ Part Time: _____

Name: _____
(Last) (First) (MI)

Address: _____
(Street) (City) (State) (Zip Code)

Phone: _____ Cell: _____ Driver's License #: _____

If you are under 18, can you furnish a Work Permit? YES NO

Have you ever been employed by the County in the Past? YES NO

If so, when and which Department: _____

If related to any of our employees, state name and department: _____

Are you legally eligible to work in this country? YES NO

Proof of citizenship or immigration will be required at time of hire.

EMPLOYMENT HISTORY

List your last four employers, including military experience, starting with most recent. May we ask your past/present

employers about you? YES NO If not, please explain: _____

Name of Supervisor: _____

Employer Name: _____

Address: _____

Phone: _____

Dates of Employment:

From: _____ To: _____

Job Title Held: _____

Reason for leaving: _____

Brief description of job responsibilities:

| | |
|----------------------|-----------------------|
| Employer Name: _____ | Dates of Employment: |
| Address: _____ | From: _____ To: _____ |
| _____ | Job Title Held: _____ |
| Phone: _____ | |

Reason for leaving: _____

Brief description of job responsibilities:

| | |
|----------------------|-----------------------|
| Employer Name: _____ | Dates of Employment: |
| Address: _____ | From: _____ To: _____ |
| _____ | Job Title Held: _____ |
| Phone: _____ | |

Reason for leaving: _____

Brief description of job responsibilities:

| | |
|----------------------|-----------------------|
| Employer Name: _____ | Dates of Employment: |
| Address: _____ | From: _____ To: _____ |
| _____ | Job Title Held: _____ |
| Phone: _____ | |

Reason for leaving: _____

Brief description of job responsibilities:

SKILLS AND QUALIFICATIONS

Summarize special skills and qualifications acquired from employment, education or other experiences that may qualify you for work with the County of Hunterdon:

EDUCATIONAL BACKGROUND

| School Name and Address | Years Completed | Graduated | Course of Study |
|-------------------------|-----------------|-----------|-----------------|
| | | YES NO | |
| | | YES NO | |
| | | YES NO | |

REFERENCES

| Name and Address | Telephone | Years Known |
|------------------|-----------|-------------|
| | | |
| | | |
| | | |

It is understood and agreed that any misrepresentation by me on this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed.

I give the employer the right to investigate all references and to secure additional information about me if job related. I hereby release from liability the employer and its representatives for seeking such information and all other persons, corporations or organizations furnishing such information.

I have read and understand the above.

Signature of applicant: _____ Date: _____

Applicants are protected from employment discrimination based on race, color, religion, sex (including pregnancy, sexual orientation, or gender identity), national origin, age (40 or older), disability and genetic information (including family medical history). Applicants are also protected from retaliation (punishment) for filing a charge or complaint of discrimination, participating in a discrimination investigation or lawsuit, or opposing discrimination (for example, threatening to file a charge or complaint of discrimination)