## Borough of Califon



## Application for Employment

The Opportunity to Compete Act, N.J.S.A. 34:6B-11 to 19, went into effect on March 1, 2015. Under this new law, an employer cannot make any inquiry—either verbally or in writing, including in an employment application—about an applicant's criminal record during the Initial Employment Application Process, unless one of the limited exceptions below applies.

The **Initial Employment Application Process** refers to "the period beginning when an applicant for employment first makes an inquiry to an employer about a prospective employment position or job vacancy or when an employer first makes any inquiry to an applicant for employment about a prospective employment position or job vacancy, and *ending* when an employer has conducted a first interview, whether in person or by any other means, of an applicant for employment." Employers can make this inquiry *after* the Initial Employment Application Process has concluded (i.e., post-interview).

The Act allows employers to request criminal history information before the first interview in the following limited circumstances:

- If an applicant voluntarily discloses his or her criminal history during the Initial Employment Application Process.
- Where the applicant is seeking a position in law enforcement, corrections, the judiciary, homeland security or emergency management.
- Where the applicant is seeking a position where a criminal history record background check is required by law, rule or regulation.
- Where the applicant may be legally precluded from holding the position by virtue of his or her arrest or conviction.
- Where any law, rule or regulation restricts an employer's ability to engage in specified business activities based on the criminal records of its employees.
- Where the applicant is seeking a position designated by the employer as part of a program designed predominately to encourage the employment of persons who have a criminal record.
- \* If application is used before the Initial Employment Application Process, question #11 should not be answered. Question #11 of the application seeks information on convictions that have not been expunged. Accordingly, unless one of the above exceptions applies, the application shall only be used after the Initial Employment Application Process.

Job applicants are considered for all positions without regard to race, creed, color, national origin, sex, affectional or sexual orientation, age, religion, marital, or veterans status, or disability. The State will not tolerate any form of discrimination or sexual harassment.

The Americans with Disabilities Act of 1990 as amended prohibits employers from discriminating against any qualified person on the basis of a disability. The State of New Jersey makes reasonable accommodations during all aspects of the employment process, such as testing and interviews. The State also makes reasonable accommodations in the work environment to enable a person with a disability to perform the essential job functions and to participate equally with co-workers without disabilities. However, the State can only make reasonable accommodations when it is aware of a disability. It is up to you to inform the prospective employer if you need a reasonable accommodation. The employer may ask you for documentation to support your request for a reasonable accommodation.

Borough of Califon is an Equal Opportunity Employer

Please PRINT or TYPE answers. Feel Please be aware that misrepresentati			Il help to place y	ou.
1. Name (Last, First, MI)		umber (Area Code)	3. Work Pi	none Number (Area Code)
4a. Address: Number, Street, Apartment Number, etc.		<b>4b.</b> If entry in 4a is yo	our mailing address p, city or borough i	
		or street, townsm	p, city of bolough in	i willeli you live.
City: County:				
State: Zip Code:				
·				
Email address:  5. Position applying for (or type of work y	you are interested in)			
are the second of the second o	, 00 0.0			
Proof of Age, Education, Milita	ry Status, and C	Citizenship may be	required upor	employment offer
6. NORTHERN		In what state regions CENTRAL	are you willing to	work? "X" all that apply:
7. Indicate preferred work schedule:  Full-Time Part-Time Tempo	rary 🔲 Days 🔲	Evenings  Late Nig	hts  Any Shift	Rotating Shift
8.				Are you 18 years old or
9a. Do you possess a driver's license that is				
9b. Do you possess a Commercial Driver Li (Answer these questions only if it is a requiremen			ecifi cation)	
10. Are you either a U.S. citizen or an alien	-		No	
		er before answering th		
11. Have you ever been convicted of a crim any other jurisdiction? (A conviction will not ne Yes (if yes, give details in Block Number	ecess <u>aril</u> y preclude you		nged by the Court,	either in New Jersey or in
12. Are you a Veteran? Yes No If yes, have you established Civil Service Ve March 1, 2001 or with the NJ Department of			Commission betwe	en April 1, 1980 and
13. Are you now or have you ever been a m	nember of any Public	Employee's Retirement		
No (If yes, indicate system name and m  14. Have you ever worked or been educate	•		necify here:	□ No
15. Are you currently on a special or regula				
the New Jersey Civil Service Commission?	_ ` —	es, indicate Titles and Sy		,
16. Explanations (Use this block for explana	ations to questions	Attach additional sheets	if necessary.)	
EDUCATION/SKILL HISTORY: Please lis attended. Upon employment be prepared to pro				
<ul> <li>Circle the number indicating the highest</li> </ul>				ŕ
	=	GED   COLLEGE	1234 Grad	luate 🗆 123456
Name and Address of School Graduate?	Did you	Credit Hours Ma Earned	ajor Subject	Number of Degree Credits in Received Major
High School last attended:	Yes No			
College or University:	Yes No			
Graduate School:	Yes No			
Other Formal Training (include Military):	Yes			

			eign languages, including sign languages, in which job (now and in the future), please list them here.
19. CLERICAL SKILLS:		Office machines operated	, computer systems/software used, and/or special skills
(a) Typing? No WPM:	Yes		
20. List all employment st  PLEASE PRINT OR TYPE		position and work bac IF NECESSARY.	k, including military experience.
From:	To:	Position Title:	Supervisor's Name:
Month: Year:	Month: Year:	Give number of staff supervised if any:	Telephone Number:
Employer's Name and Co	mplete Address:		Full Time Part Time List number of hours per week:
			Reason for Leaving:
Description of Duties:			1
From:	То:	Position Title:	Supervisor's Name:
Month:	Month:	Give number of staff supervised if any:	Telephone Number:
Employer's Name and Co	1 F & U	Gapervissa ii ariy.	Full Time Part Time List number of hours per week:
			Reason for Leaving:
Description of Duties:			I
From:	То:	Position Title:	Supervisor's Name:
Month: Year	Month: Year	Give number of staff supervised if anv:	Telephone Number:
Employer's Name and Co	mplete Address:		Full Time Part Time List number of hours per week:
			Reason for Leaving:
Description of Duties:			1
			lescribe any internships, licenses, certifications or registrations
May we contact all employer  Yes No (Indicate)	loyer/supervisors listed? exceptions):	certification or registration is held certification is required for your p	you are applying. Give name of the State in which license, d or dates and location of internship. If specific license or position, you will be required to present the appropriate credential(s) ll be responsible to renew the credential(s) and advise the (s) expires or is revoked
		Page 2	(a) supulse of the foreness.

GENERAL INFORMATION (Please print or	type. Use additional sneets it necessary.)			
22. Are you engaged in any business activity or employment which you plan to continue if employed by the				
State? If yes, your outside employment will be subject to further review regarding conflicts of interest.				
☐ No ☐ Yes				
If yes, explain:				
, 55, 57, 61				
23. Please add any additional information when he had a sublication and the sublication and the sublication and the sublication are sublications.	nich will help in placing you where you are best speaking and writing experience, membership	t qualified. Include such items as: honors,		
nobbles, publications, volunteer work, public s	speaking and writing experience, membership	in professional of scientific societies.		
24. List three people unrelated to you whom	n we may contact for information concerning y	our qualifications.		
Name:	Name:	Name:		
Address:	Address:	Address:		
Addiess.	Address.	Addioss.		
Phone Number:	Phone Number:	Phone Number:		
Occupation:	Occupation:	Occupation:		
		Cocapanoni		
Please indicate a telephone number whe	re and at what time you may be contacted for	an interview:		
·				
I understand that if I plan to engage in other business or employment while working for the State in any of its Departments or Agencies, prior approval will be necessary before accepting employment since there may New be restrictions in accordance with the				
Jersey Conflicts of Interest Law and/or the State	e, Department or Agency Code of Ethics.			
	any information they may have concerning my			
State of New Jersey and all previous employers listed above from all liability whatsoever that I may issue from securing this information further authorize representatives of this agency to verify any and all information contained and in this application, including education,				
to review any and all criminal history, military a	•	in this application, including education,		
	,,,,			
I CERTIFY that the information on this applic	cation is complete and accurate, to the best of	my knowledge. I understand that any		
misleading or incorrect information may rende	er this application void and be just cause for	immediate termination if employed.		
		STOP:Please Return Completed		
Signature:	Date:	Application to the Personnel Office		
	CTION FOR PERSONNEL OFFICE USE	ONLY		
11110 023	THORT ON I ENGONNEE OF THE GOL			

## **Borough of Califon**

## AFFIRMATIVE ACTION INFORMATION FORM

To Be Completed By Applicant **Not For Interview Purposes To** Be Filed Separately With **Affirmative Action Officer** 

The Borough of Califon of choice for all people employ a diverse workforce, to answer a few brief questions.

seeks to increase the richness and diversity of its workforce and in doing so become the employer seeking to work in State government. In order to judge the effectiveness of our efforts to attract and as well as comply with Federal and State reporting requirements, we ask that you take the time

submitted on this form

This form is not part of your application for employment and will not be considered in any hiring decision. Any information will be considered confidential and will be filed separately by the agency's affirmative action officer.

The Borough of Califon Workplace provides nationality, ancestry, sex/gender, union status, domestic partnership

is an equal opportunity employer. The New Jersey State Policy Prohibiting Discrimination in the applicants for employment are considered without regard to race, creed, color, national origin, affectional or sexual orientation, gender identity or expression, age, marital status, civil status, familial status, religion, atypical heredity cellular or blood trait, genetic

	1111 01111411	on, Armed Forces of the O	nited States or disability.
APPLICANT NAME: (L	ast, First, M)		APPLICANT ADDRESS:
POSITION(S) APPLIED	FOR:		
DATE:	DIVISION:		GENDER:
•	person of Cuban	, Mexican, Puerto Rican, South ulture or origin, regardless of race	Not Hispanic or Latino
of the original peoples America), who maintain <b>Asian</b> : A person havin Far East, Southeast As	laska Native: A pof North and Souns tribal affiliation gorigins in any osia, or the Indian China, India, Japa	person having origins in any th America (including Central or community attachment. If the original peoples of the subcontinent including, for n, Korea, Malaysia, Pakistan, tnam.	Black or African American: A person having origins in any of the black racial groups of Africa.  Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.  White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
allow If you are of more t	han one race ple	a collection requirements to ease identify them below. he two or more races with which  Black or African American	employees who may be of two or more races to identify themselves. you identify) White

REFERRAL SOURCE:

How did you learn of this \_position?