The Arc of Cumberland County

1680 West Sherman Ave.
Vineland, New Jersey 08360
Phone: 856-691-9138
FAX: 856-563-0221
arccumberland.org

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status.

Application for Employment

PERSONAL

Last Name First Middle	Date
Street Address	Home Telephone ( )
City, State, Zip	Business Telephone ( )
Have you ever applied for employment with us? ☐ Yes ☐ No If yes: Month and Year _____ Location _____	Social Security #
Position Desired	Pay Expected
Apart from absence for religious observance, are you eligible for full-time work? ☐ Yes ☐ No If not, what hours can you work? _____	Will you work overtime if asked? ☐ Yes ☐ No
Are you legally eligible for employment in the United States?	When will you be available to begin work? _____
Other special training or skills (languages, machine operation, ext.)	

EDUCATION

School	Name and Location of School	Course of Study	No. Of Years Completed	Did you Graduate?	Degree or Diploma
Graduate				☐ Yes ☐ No	
College				☐ Yes ☐ No	
Business/Trade/ Technical				☐ Yes ☐ No	
High School				☐ Yes ☐ No	
Elementary				☐ Yes ☐ No	

Membership in Professional or Civic Organizations (Exclude thosse which may disclose your race, color, religion or national origin.)

EMPLOYMENT

Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer.

1

Company Name	Telephone ( )
Address	Employed - (State month and year) From To
Name of Supervisor	
State Job Title and Describe Your Work	Reason for Leaving

2

Company Name	Telephone ( )
Address	Employed - (State month and year) From To
Name of Supervisor	
State Job Title and Describe Your Work	Reason for Leaving

3

Company Name	Telephone ( )
Address	Employed - (State month and year) From To
Name of Supervisor	
State Job Title and Describe Your Work	Reason for Leaving

4

Company Name	Telephone ( )
Address	Employed - (State month and year) From To
Name of Supervisor	
State Job Title and Describe Your Work	Reason for Leaving

We may contact the employers listed above unless you indicate those you do not want us to contact.	**DO NOT CONTACT**
	Employer Number(s) _____ Reason _____

MILITARY	Did you serve in the U.S. Armed Forces? ☐Yes I No	If "Yes," in what Branch?
Descrive any training received relevant to the position for which you are applying.		

The information requested is needed for a legally perissible reason, including, without limitation, national security considerations, a legitimate occupational qualification or business necessity. The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex or national origin. Federal law also prohibits discrimination based on age, citizenship and disability. The laws of most States also prohibits some or all of the above types of discrimination as well as some additional types such as discrimination based upon ancestry, marital status and sexual preference.

Sex	Are you a U.S Citizen?	Are you 18 years old or older?	If not, employment is subject to verification of age.
☐ Male ☐ Female	☐ Yes ☐ No	☐ Yes ☐ No	

Have you ever been convicted of a crime?

☐ Yes ☐ No If "Yes," please describe in full. _____

_____

PERSONAL REFERENCES

Please provide at least 3 personal references who are NOTrelated to you.

	Name	Business	Telephone	Years Known
1				
2				
3				
4				

Additional Comments:

_____

_____

_____

The information provided in this Application for Employment is true, correct, and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal.

I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.

If you decide to engage an investigative consumer reporting agency to report on my credit and personal history, I authorize you to do so. If a report is obtained you must provide, at my request, the name of the agency so I may obtain from them the nature and subtance of the information contained in the report.

_____ _____

SIGNATURE DATE

FOR OFFICE USE ONLY

Date of Hire	Job Classification	Starting Rate

PROSPECTIVE EMPLOYEE PRE-EMPLOYMENT DISCLOSURE STATEMENT

I, _____, do certify that I have never been adjudged to be either civilly or criminally liable for the abuse of a developmentally disabled person receiving services from the New Jersey Division of Developmental Disabilities or the New Jersey Division of Vocational Rehabilitation Services.

_____ _____

Prospective Employee Signature DATE