

Employment Application - EOE Apply for Employment

We are an equal opportunity employer, dedicated to a policy of nondiscrimination in employment on any basis including race, color, age, sex, religion, disability or national origin. Consistent with the Americans With Disabilities Act, applicants may request accommodations needed to participate in the application process. When you have completed the form, click on the Submit button to send your application.



Personal Information

Social Security No.	<input type="text"/>	Mailing Address	<input type="text"/>
Last Name	<input type="text"/>	City	<input type="text"/>
First Name	<input type="text"/>	State	<input type="text"/>
Middle Name	<input type="text"/>	Zip	<input type="text"/>
Present Address	<input type="text"/>	E-mail Address	<input type="text"/>
City	<input type="text"/>	Phone No.	<input type="text"/>
State	<input type="text"/>	Referred by	<input type="text"/>
Zip	<input type="text"/>		

Are you 18 years of age or older? Yes No

Employment Desired

Position	<input type="text"/>	Are you employed now?	<input type="radio"/> Yes <input type="radio"/> No
Date You Can Start	<input type="text"/>	If so may we contact your present employer?	<input type="radio"/> Yes <input type="radio"/> No
Salary Desired	<input type="text"/>	Have you ever applied to this Company before?	<input type="radio"/> Yes <input type="radio"/> No
		If so, where?	<input type="text"/>
		when?	<input type="text"/>

Former Employers

List below your most recent employer.

Dates (Month & Year) From:	<input type="text"/>	To:	<input type="text"/>
Salary (upon leaving)	<input type="text"/>		
Reason for Leaving	<input type="text"/>		

Name and Address of Employer	<input type="text"/>
Position	<input type="text"/>

Please read the following disclosure and scroll down to submit this application.

If you are hired by the Company, you will be required to attest to your identity and employment eligibility, and to present documents confirming your identity and employment eligibility. You cannot be hired if you cannot comply with these requirements.

AUTHORIZATION

I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by the Company.

I agree and understand that any employment is conditioned on a background and credit bureau check. I authorize the Company to thoroughly investigate all statements contained in my application or resume, and I authorize my former employers and references to disclose information regarding my former employment, character and general reputation to the Company, without giving me prior notice of such disclosure. In addition, I release the Company, any former employers and all references listed above from any and all claims, demands, or liabilities arising out of or related to such investigation or disclosure.

I understand and agree that nothing contained in this application, or conveyed during my interview, is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be "at will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of either myself or the Company. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Company unless made in writing.

If I am offered employment I agree to submit to a medical examination and drug tests, if required, before starting work. If employed, I also agree to submit to a medical examination or drug test at any time deemed appropriate by the Company and as permitted by law. I consent to such examinations and tests, and I request that the examining doctor disclose to the Company the results of the examination, which results shall remain confidential and segregated from my personnel file. I understand that my employment or continued employment, to the extent permitted by law, may be contingent upon satisfactory medical examinations and drug test, and if I am hired a condition of my employment will be that I abide by the Company's Drug and Alcohol Policy.

I understand that filling out this form does not indicate there is a position open and does not obligate the Company to hire. If hired, I agree to abide by all Company work rules, policies, and procedures. The Company retains the right to revise its policies or procedures, in whole or in part, at any time.

Please print, sign and mail to 225 E. State St. 1st Floor, Trenton, NJ 08666 Attn: Visa Department
Or email it to LOANS@NJLPSCU.ORG or FAX to 609-393-0241