

**Legal Services of New Jersey, Inc.**  
**Application for Employment**

**PERSONAL INFORMATION**

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Position Applied For \_\_\_\_\_ Salary Desired \_\_\_\_\_

Where did you hear of the position \_\_\_\_\_

Name \_\_\_\_\_ Social Security Number (last 4 digits only) \_\_\_\_\_

Address \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Home (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_

Note: All prospective employees must submit proof of identity and eligibility for employment in the U.S. prior to appointment. Please list any restrictions on your eligibility for employment imposed by United States Immigration Law.

Are you legally eligible to work in the U.S.? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever served in the military service? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, Branch \_\_\_\_\_, Date entered \_\_\_\_\_, Date discharged \_\_\_\_\_

Have you ever worked for LSNJ? Yes \_\_\_\_\_ No \_\_\_\_\_ What Position? \_\_\_\_\_ When? \_\_\_\_\_  
If you are related to anyone in our employ, or on our Board of Trustees, please state his/her name: \_\_\_\_\_

Do you have a driver's license? Yes \_\_\_\_\_ No \_\_\_\_\_  
For some LSNJ positions, driver's license and access to a motor vehicle will be necessary.

Have you ever been fired or asked to resign from a job? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, give the name and address of employer and describe reason. A firing or forced resignation does not automatically exclude you from employment.

**EDUCATION**

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**High School**

Name and location of the last high school attended: \_\_\_\_\_

Did you graduate? Yes \_\_\_\_\_ No \_\_\_\_\_ If not, have you passed a G.E.D. test? Yes \_\_\_\_\_ No \_\_\_\_\_

**College/Post Graduate**

School Name \_\_\_\_\_ Major Area of Study \_\_\_\_\_ Degree \_\_\_\_\_ Date of Graduation \_\_\_\_\_ Cumulative GPA \_\_\_\_\_

Special Qualifications and Skills: (foreign languages, professional licenses, certificates, computer skills, typing)

## **EXPERIENCE**

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The selection process for most positions involves an evaluation of relevant education and experience. It is important, therefore, that you provide enough details so that your qualifications can be properly evaluated. Start with your present job and work back. Be sure to include all requested information.

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|-----------------------------|--------------------------------|----------------------------|
| Current Employer            | Dates:<br>From<br>Phone Number | To<br>Regular Hrs per Week |
| Address                     | Salary:<br>Starting            | Ending                     |
| Job Title                   |                                |                            |
| Supervisor's Name           |                                |                            |
| Reason for wanting to leave |                                |                            |

Describe your work:

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|--------------------|--------------------------------|----------------------------|
| Employer           | Dates:<br>From<br>Phone Number | To<br>Regular Hrs per Week |
| Address            | Salary:<br>Starting            | Ending                     |
| Job Title          |                                |                            |
| Supervisor's Name  |                                |                            |
| Reason for Leaving |                                |                            |

Describe your work:

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|                    |                                |                            |
|--------------------|--------------------------------|----------------------------|
| Employer           | Dates:<br>From<br>Phone Number | To<br>Regular Hrs per Week |
| Address            | Salary:<br>Starting            | Ending                     |
| Job Title          |                                |                            |
| Supervisor's Name  |                                |                            |
| Reason for Leaving |                                |                            |

Describe your work:

Employer

Address

Job Title

Supervisor's Name

Reason for Leaving

Describe your work:

Dates:

From

Phone

Number

Salary:

Starting

To

Regular Hrs  
per Week

Ending

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List any activities which have provided you with experience you consider useful for the position in which you are interested or for work on behalf of low-income people?

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May we conduct a background check of your qualifications, character and record of employment?

Yes

No

If no, please explain

Please list 3 professional references, not relatives (**preferably past supervisors**) who can tell us about your qualifications.

Name

Title/Company

Telephone Number

Yrs. Known

Name

Title/Company

Telephone Number

Yrs. Known

Name

Title/Company

Telephone Number

Yrs. Known

**CERTIFICATION**

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This statement must be signed.

I certify that all of the statements made in this application are true and complete to the best of my knowledge. I understand that a false or incomplete answer may be grounds for not employing me or for dismissing me   after I have begun work. I authorize investigation by LSNJ of all statements contained in this application or made by me during any interviews. I waive all rights I might have against a previous employer who provides references and/or records concerning my employment history.

Signature

Date