

Employment Application

Part Time Fire Inspector

Print Form



Township of Pennsauken Fire Department

5301 Lexington Avenue
Pennsauken, NJ 08109

Phone: (856)663-1208
Fax: (856)663-8929

www.pennsauken.gov

Date:

Name:

Address:

State:

Zip/Postal Code:

SS Number:

Home Phone:

Cell Phone:

Email Address:

Do you have NJ Fire Inspector License? ☐ yes ☐ no

Do you have NJ Fire Official License? ☐ yes ☐ no

Do you have NJ Fire Sub Code License? ☐ yes ☐ no

Other Licenses Held:

Date available to begin work?

Available to work some nights and weekends ? ☐ yes ☐ no

Education

Type of School	Name of School and Complete Mailing Address	No. Years Completed	Major or Degree
High School			
College			
Trade or Professional School			
Other			

Have you ever been convicted of a crime: ☐ yes ☐ no

If yes, please explain

Do you have a drivers license? ☐ yes ☐ no

DL # & State of issue:

Have you had any accidents in the past 3 years? ☐ yes ☐ no

How many?

Do you had any moving violations in the past 3 years? ☐ yes ☐ no

How many?

Is your driving privilege currently been suspended ☐ yes ☐ no

Continue on the next page

Previous Employment (list up to 3)

1.

Name of Employer:

Name of last supervisor:

Dates of employment:

From:

To:

Salary:

From:

To:

Complete Address:

Phone #:

Last job title:

Reason for Leaving (be specific):

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company:

May we contact your employer: ☐ yes ☐ no

2.

Name of Employer:

Name of last supervisor:

Dates of employment:

From:

To:

Salary:

From:

To:

Complete Address:

Phone #:

Last job title:

Reason for Leaving (be specific):

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company:

May we contact your employer: ☐ yes ☐ no

Continue on the next page

3.

Name of Employer:

Name of last supervisor:

Dates of employment:

From:

To:

Salary:

From:

To:

Complete Address:

Phone #:

Last job title:

Reason for Leaving (be specific):

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company:

May we contact your employer: ☐ yes ☐ no

Skills:

Typing:

Computer: ☐ PC ☐ Mac ☐ Both

Applications (list all that apply):

Other Skills:

Please list 2 references other than relatives and previous employers

Name		
Position		
Company		
Telephone		

Use this space to add any additional information necessary to describe your full qualifications for the position which you are applying: