

**THE OPEN DOOR OF NJ**  
**2152 Route 70**  
**Manchester, NJ 08759**  
**EMPLOYMENT APPLICATION**

| <b>APPLICANT INFORMATION</b>   |                |  |      |
|--|----------------|--|------|
| Last Name  | First          | M.I.   | Date |
| Street Address   |                |  |      |
| City   |                | State  | Zip  |
| Phone<br>-----<br>Cell#  |                | E-mail Address   |      |
| Date Available To Start  |                | Date of Birth  |      |
| Position Applied for   | Shift Desired: | Desired Salary   |      |
| Referred By  |                |  |      |
| Are you a citizen of the United States?<br>YES <input type="checkbox"/> NO <input type="checkbox"/>  |                | If no, are you authorized to work in the U.S.?<br>YES <input type="checkbox"/> NO <input type="checkbox"/> |      |
| Have you ever worked for this company?<br>YES <input type="checkbox"/> NO <input type="checkbox"/>   |                | If so, when?   |      |
| Have you ever been convicted of a crime?<br>YES <input type="checkbox"/> NO <input type="checkbox"/>   |                | If yes, explain  |      |
| Have you ever been adjudicated civilly or criminally liable for abuse of a person with a developmentally disabled person<br>YES <input type="checkbox"/> NO <input type="checkbox"/> |                | If yes, explain  |      |
| Do you have any family members that work here?<br>YES <input type="checkbox"/> NO <input type="checkbox"/>   |                | If yes, state name, and relationship   |      |
| Are you currently employed?  |                | Do you have a valid NJ Driver's License?   |      |

| <b>EDUCATION</b>  |    |   |                       |
|---|----|---|-----------------------|
| High School   |    | Address   |                       |
| From  | To | Did you graduate?<br>YES <input type="checkbox"/> NO <input type="checkbox"/> | Degree                |
| College   |    | Address   |                       |
| From  | To | Did you graduate?<br>YES <input type="checkbox"/> NO <input type="checkbox"/> | Degree                |
| List any additional trainings or certifications<br>_____<br>_____ |    |   |                       |
| <b>- ADMINISTRATIVE OFFICE USE -</b>                              |    |   |                       |
| <i>Administrative Notes:</i><br>_____<br>_____                    |    |   |                       |
|   |    |   | <i>Training Date:</i> |

**REFERENCES***Please list three personal/professional references (DO NOT LIST FAMILY MEMBERS)*

|           |  |              |  |
|-----------|--|--------------|--|
| Full Name |  | Relationship |  |
| Company   |  | Phone        |  |
| Address   |  |              |  |
| Full Name |  | Relationship |  |
| Company   |  | Phone        |  |
| Address   |  |              |  |
| Full Name |  | Relationship |  |
| Company   |  | Phone        |  |
| Address   |  |              |  |

**CURRENT/PREVIOUS EMPLOYMENT**

|   |            |                    |                  |
|---|------------|--------------------|------------------|
| Company   |            | Phone              |                  |
| Address   |            |                    |                  |
| Job Title   | Supervisor | Starting Salary \$ | Ending Salary \$ |
| Responsibilities  |            |                    |                  |
| From  | To         | Reason for Leaving |                  |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> |            |                    |                  |
| Company   |            | Phone              |                  |
| Address   |            |                    |                  |
| Job Title   | Supervisor | Starting Salary \$ | Ending Salary \$ |
| Responsibilities  |            |                    |                  |
| From  | To         | Reason for Leaving |                  |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> |            |                    |                  |
| Company   |            | Phone              |                  |
| Address   |            |                    |                  |
| Job Title   | Supervisor | Starting Salary \$ | Ending Salary \$ |
| Responsibilities  |            |                    |                  |
| From  | To         | Reason for Leaving |                  |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> |            |                    |                  |

**DISCLAIMER AND SIGNATURE**

I agree and understand that all statements and information on my application are correct and no attempt has been made to conceal or withhold pertinent information. I agree that any falsification, omission, or misrepresentation is cause for immediate termination at any time during my employment.

|           |      |
|-----------|------|
| Signature | Date |
|-----------|------|