



UNION COUNTY UTILITIES AUTHORITY

1499 Routes 1 & 9, North, Rahway, New Jersey 07065

(732) 382-9400

info@ucua.org

JOB APPLICATION

CHECKLIST OF PROCEDURES TO BE COMPLETED BY APPLICANTS

PERSONAL DOCUMENTS NEEDED FOR THE BACKGROUND CHECK

The following documents must be presented as part of the background check. If you cannot obtain any of these documents, you must state in the section provided for additional information what documents you were unable to provide and the reason(s). Please place a check mark next to the documents you have presented and N/A for the documents that do not pertain to you. *Please hand in the following documents in the order listed below.*

- _____ Drivers License from any state which you possess
- _____ High School Diploma or GED Certificate
- _____ College Diploma
- _____ Any trade or professional license you possess
- _____ Social Security Card
- _____ U.S. Citizenship (naturalization) papers
- _____ Specialized training certificates

Credit History must be provided, at your own expense, through one of the following:

1. Experian Information Services (888) 394-3742
P.O. Box 2002, Allen, Texas 75013
2. Exquifax Information Services (800) 685-1111
P.O. Box 740256, Atlanta, Georgia 30374
3. Trans Union Corporation (800) 916-8800
P.O. Box 34012, Fullerton, California 92834

Any documents you cannot locate can be submitted at a later date.

Signature of Applicant

Date

PERSONAL DATA

1. Full name: _____
Last First Middle
2. Give any other names you have used or been known by, and attach a statement giving reasons (if none, so state) _____

3. Present Address: _____
Number Street/Avenue
- City County State Zip Code

Telephone Number _____

E Mail Address _____

4. How long have you resided there? _____

5. In chronological order, list each and every place you have resided during the past ten years beginning with your present address:

From Mo. Yr.	To Mo. Yr.	Street Address	Complete Address Town/City	State
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

6. Date of Birth: Month _____ Day _____ Year _____
Age _____ Sex _____ Height _____ Weight _____
Eye color _____ Hair color _____

7. Place of Birth _____

8. Social Security Number _____

9. Marital Status _____

10. List below all dependents:

_____	Name
_____	Name
_____	Name

11. References - List the names of three (3) friends and/or associates:

Name			Telephone #
Street Address	City/Town	State	Zip Code
Name			Telephone #
Street Address	City/Town	State	Zip Code
Name			Telephone #
Street Address	City/Town	State	Zip Code

EDUCATION

12. List chronologically, earliest dates first, all schools, colleges and training courses you have attended:

School	Address
From _____ Month/Year	To _____ Month/Year
	Day/Evening
	Last Grade/Term
School	Address
From _____ Month/Year	To _____ Month/Year
	Day/Evening
	Last Grade/Term
School	Address
From _____ Month/Year	To _____ Month/Year
	Day/Evening
	Last Grade/Term
School	Address
From _____ Month/Year	To _____ Month/Year
	Day/Evening
	Last Grade/Term

13. Majoring in _____

14. Total credits achieved towards degree _____

15. What college degree(s) or professional license(s) do you possess?

16. Other than English, what language(s) do you:

Speak _____

Understand _____

MILITARY SERVICE

17. Have you ever served in an active military organization of the United States?

Yes _____ No _____

18. Type of Discharge: _____

If other than Honorable, explain: _____

19. Are you now or were you ever an active or inactive member of the Reserve Forces, any branch of the United States, or any foreign government, or the National Guard of any state?

Yes _____ No _____

Active or Inactive _____ Branch _____ Regiment _____

Unit _____ Rank _____ Dates of Service: from _____ to _____

EMPLOYMENT BACKGROUND

20. Present employer:

Name/Company		Telephone Number
Address	City/State	Zip Code
Date Hired	Duties	

21. Are you now engaged in any business as an owner, partner, stockholder, or corporate member?

Yes or No _____

If yes, give details: _____

22. Have you ever been discharged or asked to resign from employment? Yes or No _____

If yes, give details: _____

23. Were you ever subject to any disciplinary action in connection with employment?
Yes or No _____

If yes, give details: _____

FINANCIAL HISTORY

If you answer yes to any of the following questions, you must provide full details in additional information section

24. Have you ever been a party to any civil judgement?
Yes _____ No _____
25. Have you ever been a party of a small claims court action?
Yes _____ No _____
26. Do you have any immediate civil action pending against you?
Yes _____ No _____
27. Have you ever had a civil judgment rendered against you?
Yes _____ No _____
28. Have you ever filed or declared bankruptcy?
Yes _____ No _____
29. Have you ever had any property repossessed?
Yes _____ No _____
30. Have you ever been bonded?
Yes _____ No _____
31. Have you ever been refused to be bonded?
Yes _____ No _____

ARRESTS, SUMMONSES, ETC.

32. Have you ever been arrested? Yes _____ No _____ If yes, give details below:
Date Violation Disposition Police Agency Involved

33. Motor vehicle history: Have you ever received a summons for a violation of the Motor Vehicle Laws in this state or any other state? (exclude parking violations) Yes _____ No _____ If yes, give details below:

Date	Offense	Disposition

34. Do you hold a valid driver's license in this or any other state? Yes _____ No _____

Drivers License # _____ State _____

35. Has your driving or registration privilege ever been suspended or revoked? Yes _____ No _____
If yes, give details:

36. Are you licensed to drive any vehicle other than a passenger car? Yes _____ No _____
If yes, give details:

I, _____, do solemnly swear that all the information I have provided in this application is the truth to the best of my knowledge. I am aware that any information that has been knowingly withheld by me will be subject to making this application null and void in its entirety, and will also make me ineligible to continue in this process.

Applicant Signature

Date

DO NOT WRITE BELOW THIS LINE

Application received on _____

Received By: _____

UNION COUNTY UTILITIES AUTHORITY

DRUG SCREENING THROUGH URINALYSIS
APPLICANT CONSENT

I, _____, understand that as part of the hiring process, the UCUA will conduct a comprehensive background investigation in an effort to determine my suitability to fill the position for which I have applied. I further understand that as a part of the hiring process, I will be required to submit to a medical examination. I do hereby consent to the sampling and submission for testing of my urine for the purpose of drug screening. I also understand that a negative result is a condition of continuance in the hiring process.

I also understand that refusing to supply the required samples or producing a positive confirmed test result for the presence of illegal drugs will result in the rejection of my application.

I understand that the results of the urinalysis will be provided to me as soon as possible after receipt by the UCUA.

Signature of Witness

Signature of Applicant

Date

Date

RELEASE AUTHORIZATION

To all courts, probation departments, selective service boards, physicians, hospitals, employers, educational and other institutions and agencies without exception.

I, _____, am making application for appointment to the position of Waste Compliance Inspector with the Union County Utilities Authority. As a result, an investigation is being conducted to determine my eligibility.

Therefore, you are authorized to release to the Union County Utilities Authority or its representative's any and all information, documentary or otherwise, pertaining to me that they may request.

I hereby release, discharge and exonerate the Union County Utilities Authority, its agents and representatives, and any person so furnishing information, from all liability of every nature and kind arising out of furnishing, inspection or collection of such documents, records and other information or the investigation made by the Union County Utilities Authority.

Signature of Witness

Signature of Applicant

Date

Date