# New Jersey Department of Labor and Workforce Development

# **Internship Application**

Internship ID # (required)	(found	(found on the upper right of the Internship Posting)		
Name (Last)	(First)	MI		
Address				
City	State	ZIP Code		
Daytime Phone Number				
Are you a U.S. citizen?  If not, are you an alien authori	ized to work in the U.S.?	☐ Yes ☐ Yes	□ No □ No	
Current Educational Institution				
Major/Program of Study				
Undergraduate Student	☐ Junior ☐ Senior ☐ Freshman ☐ Sophomore ☐ Year 1 ☐ Year 2			
Expected Graduation Date (mm/yy)				
<b>NOTE</b> : To maintain an Internship pro employed by another public or private	,	•	oor, no Intern can be	
[ ] By checking this box I affirm that the duration of the Internship Program		y source of emp	ployment for the	
[ ] By checking this box and typing m understand that an electronic sign				
Type Name	Date (mm/dd/yyyy)			
To apply, submit the following to N	JDOLInterns@dol.nj.gov <b>by</b>	May 10, 2019:		
<ul><li>✓ Completed Application Par</li><li>✓ Cover Letter</li><li>✓ Resume (including daytime</li></ul>		address)		
Your email subject line should be "Su	•		th the Internship ID #.	

### New Jersey Department of Labor and Workforce Development

### **Affirmative Action Information**

This form is not part of your application for employment and is considered confidential information that will not be used in any hiring decision. The information obtained is to comply with State and Federal record keeping and reporting requirements and will be filed separately by the agency's Diversity Officer. Your cooperation is appreciated.

Job applicants are considered for all positions without regard to race, creed, color, national origin, sex, affectations or sexual orientation, age, religion, marital or veteran status, or disability.

Date	(mm/dd/yy)				
Internship ID # (from the Internshi	o Posting, if applying	for a specific	opportunity)		
Referral Source					
□ Advertisement	Employee	□ Relative	■ Walk-In	NJDOL Website	
□ School/College Program Employment Agency □ College Employment Website					
□ Other		_			
Name (Last)		(First)		MI	
DI // I I A					
Phone (Include Are	ea Code) Daytime		Home	e	
Sex			Home	9	
Sex	e □ Male or Native Alaskan	□ Asian			
Sex	e □ Male or Native Alaskan	□ Asian	lawaiian or Pac		
Race American Indian Black or African White	e □ Male or Native Alaskan	□ Asian □ Native H □ 2 or Mor	lawaiian or Pac e		

TO BE COMPLETED BY APPLICANT – NOT FOR INTERVIEW PURPOSES

Spanish culture or origin, regardless of race.

### New Jersey Department of Labor and Workforce Development

## **Personal Relationships Disclosure**

In accordance with the Uniform Ethics Code adopted by the NJ State Ethics Commission and the State Policy Prohibiting Discrimination in the Workplace, the Department of Labor and Workforce Development (NJDOL) requires the disclosure of all relatives, consensual personal relationships, and cohabitants. No NJDOL employee may supervise or exercise any authority with regard to personnel actions involving his/her relative, anyone with whom there is a consensual personal relationship, or anyone with whom they cohabit.

**Relative** means an individual's spouse/domestic partner/civil union partner1 or the individual or spouse's/domestic partner's/civil union partner's parent, child, brother, sister, aunt, uncle, niece, nephew, cousin, grandparent, grandchild, son-in-law, daughter-in-law, stepparent, stepchild, stepbrother, stepsister, half-brother or half-sister, whether the relative is related to the individual or the individual's spouse/domestic partner/civil union partner by blood, marriage or adoption, blood, marriage or adoption.

**Consensual personal relationship** means marriage, engagement, dating or other ongoing romantic or sexual relationships.

**Cohabitant** means non-related persons who share a household under circumstances where there is financial interdependence.

NJDOL requires the disclosure of all relatives and consensual personal relationships to be promptly reported directly to the Division of Human Capital Strategies (HCS) Director's Office. Confidentiality shall be maintained to the extent possible and practicable. This information may be shared with NJDOL's Equal Employment Opportunity Office ("EEO Office") and/or the NJDOL Ethics Office as deemed necessary. Upon receiving notice of the relationship, HCS may address any situation as necessary in consultation with the EEO Office and/or the Ethics Officer. This may include, but is not limited to, changing the reporting relationships or transferring any employees/interns involved. Failure to provide notification to HCS may result in discipline up to and including termination and the denial of legal representation and indemnification by the State in the event that a lawsuit is filed having a connection with a personal relationship. Employees are under a continuing obligation to promptly report personal relationships that develop during the course of their employment.

working for the Department of	consensual personal relationship, f Labor and Workforce Developm	·
	nsual personal relationship, as de nd Workforce Development iden	efined above, with anyone working tified as follows:
Name	Relationship	Division and Work Location
Do you need more space for disclo	osure?	re on next page.)
accurate. I understand that any mi a material fact may be just cause f	sleading or incorrect information or disciplinary action up to and ir	dge and belief is true, complete and , willful misstatement, or omission of acluding termination. I understand my during the course of my employment.
Applicant's Name		Date
Applicant's Signature		(mm/dd/yy)

# New Jersey Department of Labor and Workforce Development This page for additional disclosure information, if needed