

TOWN OF BLOOMFIELD



PERSONNEL DEPARTMENT

800 BLOOMFIELD AVENUE

P.O. BOX 337

BLOOMFIELD, CT 06002

(860) 769-3544

TDD (860) 769-3594

APPLICATION FOR EMPLOYMENT

*This application constitutes a part of the examination process. The Town cannot assume responsibility for the confidentiality of information provided in an employment application. It must be completed in **full** even if resumes or other supporting materials are attached. Please answer all questions fully and accurately. Applications may be rejected or receive lower ratings because answers are incomplete, vague or evasive. Your statements may be brief, but do not omit important information which may have relevance to the position.*

PLEASE CONTACT THE PERSONNEL DEPARTMENT IF ACCOMMODATION IS REQUIRED TO COMPLETE THE APPLICATION PROCESS

(PLEASE TYPE OR PRINT CLEARLY)

POSITION(S) APPLIED FOR _____ DATE _____

PERSONAL

Name _____ Social Security No. _____
Last First Middle

Residential Address _____ Telephone No. (____) _____
No. Street City State Zip Home

Mailing Address _____ Telephone No. (____) _____
No. Street City State Zip Business

Are you 18 years or older? Yes ___ No ___ If no, please state age ___

Date available for work? ___/___/___
Month Day Year

Are you able to perform the essential functions of the job without accommodation? ___ Yes ___ No

Have you ever been fired or asked to resign from a job? Yes ___ No ___

IF YES, Explain (use separate sheet if necessary) _____

Have you ever been convicted of a felony? A "yes" answer will not automatically disqualify you from employment. The nature and seriousness of the offense and date of the conviction will be considered.

YES _____ NO _____

IF YES, Explain (use separated sheet if necessary) _____

HAVE YOU EVER SERVED IN THE UNITED STATES MILITARY? YES _____ NO _____

IF YES, MUST PROVIDE A COPY OF DD-214 TO RECEIVE VETERANS CREDIT

IF YOU ARE APPLYING FOR A POSITION WHICH REQUIRES THE DRIVING OF ANY MOTOR VEHICLE, PLEASE ANSWER THE FOLLOWING QUESTIONS. IF YOU ARE NOT APPLYING FOR A POSITION REQUIRING A DRIVERS LICENSE, PROCEED TO RECORD OF EDUCATION.

DO YOU HAVE A VALID DRIVER'S LICENSE? YES _____ NO _____

Operator's No. _____ Endorsements _____

STATE _____ CLASS _____

RECORD OF EDUCATION

SCHOOL	NAME & ADDRESS OF SCHOOL	YEARS ATTENDED	COURSE OF STUDY	CHECK LAST YEAR COMPLETED				DID YOU GRADUATE?	LIST DIPLOMA OR DEGREE
				1	2	3	4		
HIGH SCHOOL/ GED			X						X
TECHNICAL									
COLLEGE									
GRADUATE SCHOOL									

EMPLOYMENT HISTORY/EXPERIENCE

BEGIN WITH PRESENT OR MOST RECENT EMPLOYMENT AND WORK BACKWARD CONSECUTIVELY. ACCOUNTING FOR ALL TIME SINCE SCHOOL. IF YOU HELD SEVERAL DIFFERENT POSITIONS WITH THE SAME EMPLOYER, LIST SEPARATELY. IF YOU NEED MORE SPACE, USE ADDITIONAL FORMS, OR A SHEET OF PLAIN WHITE PAPER.

DUTIES: DESCRIBE THE NATURE OF THE WORK PERSONALLY PERFORMED BY YOU. STATE SIZE AND KIND OF WORK FORCE, IF ANY, SUPERVISED BY YOU AND EXTENT OF SUCH SUPERVISION.

EMPLOYER: _____ YOUR TITLE: _____

ADDRESS: _____ TELEPHONE: (____) _____

SUPERVISOR: _____ TITLE: _____ May We Contact _____

DATES EMPLOYED - FROM: _____ TO: _____ SALARY - START: _____ FINAL: _____

DESCRIPTION OF DUTIES: _____

REASON FOR LEAVING: _____

EMPLOYER: _____ YOUR TITLE: _____

ADDRESS: _____ TELEPHONE: (____) _____

SUPERVISOR: _____ TITLE: _____ May We Contact _____

DATES EMPLOYED - FROM: _____ TO: _____ SALARY - START: _____ FINAL: _____

DESCRIPTION OF DUTIES: _____

REASON FOR LEAVING: _____

EMPLOYER: _____ YOUR TITLE: _____

ADDRESS: _____ TELEPHONE: (____) _____

SUPERVISOR: _____ TITLE: _____ May We Contact _____

DATES EMPLOYED - FROM: _____ TO: _____ SALARY - START: _____ FINAL: _____

DESCRIPTION OF DUTIES: _____

REASON FOR LEAVING: _____

EMPLOYER: _____ YOUR TITLE: _____

ADDRESS: _____ TELEPHONE: (____) _____

SUPERVISOR: _____ TITLE: _____ May We Contact _____

DATES EMPLOYED - FROM: _____ TO: _____ SALARY - START: _____ FINAL: _____

DESCRIPTION OF DUTIES: _____

REASON FOR LEAVING: _____

Are there any other experiences, skills, or qualifications which will be of special benefit in the job for which you are applying? _____

CERTIFICATION:

1. I certify that there are no misrepresentations, omissions, or falsifications in the foregoing statements and answers and that the entries made by me are true, complete and correct to the best of my knowledge and belief. I realize that the misrepresentation, omission or falsification of any information on this application is grounds for denial of employment or termination from employment if employment has already commenced.
2. I understand that failure to follow directions and complete all sections of this application is grounds for immediate dismissal from the application process.
3. I give my consent to the Town to check with personal references, previous employers and educational institutions concerning my employment or personal history.
4. I release the Town, previous employers and educational institutions from any liability arising from disclosure of information concerning my employment or personal history.
5. The acceptance of this application or the granting of an interview does not constitute an offer of employment or an employment agreement of any kind. In the event I am employed by the Town, I understand that the terms and conditions of my employment will be governed by the orders, rules, regulations and/or collective bargaining agreement.
6. Proof of citizenship or employment eligibility in accordance with the Immigration and Reform and Control Act of 1986 will be required at the time of appointment.
7. Applicants are subject to pre-employment drug testing pursuant to Connecticut General Statutes 31.5v. A positive test result is grounds for denial of employment or the withdrawal of any offer of employment. Individuals who are employed in positions designated as safety sensitive/high risk, or in positions requiring Commercial Driver's Licenses will be subject to random testing pursuant to state and federal law.

I hereby acknowledge that I have read the above statements and understand them.

Signature _____

Date: _____