



Application of Employment  
Town of Branford

**GENERAL:**

Name \_\_\_\_\_

Tel. No. (Home) \_\_\_\_\_ Tel. No. (Cell) \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_

Position Applying for \_\_\_\_\_

Full-Time ( ) Part-Time ( )

**Instructions:**

Fill out this application completely and accurately. All statements in this application are subject to verification. Any applicant giving false information will be subject to disqualification.

If a question does not apply to you, write N/A (not applicable). If the space provided is inadequate, please document the additional information on a separate sheet of paper (8.5 X 11) and indicate the question you are responding to. More than one answer may be put on a sheet.

This application form should be legible in black or blue ink.

**PERSONAL INFORMATION:**

Are you a citizen or legally eligible for employment in the USA? YES ( ) NO ( )

[If yes, verification will be required.]

Are you of legal age to work? YES ( ) NO ( )

Are you now, or have you ever been employed by the Town of Branford? YES ( ) NO ( )

[If yes, what department \_\_\_\_\_]

Is any member of your immediate family now employed by the Town of Branford? YES ( ) NO ( )

[If yes, name \_\_\_\_\_]

Please read before answering the following question: (1) You are not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to Section 46b-146, 54-760 or 54-142a, (2) that criminal records subject to erasure pursuant to Section 46b-146, 54-760 or 54-142a are records pertaining to a finding of delinquency or that a child was a member of a family with service needs, an adjudication as a youthful offender, a criminal charge that has been dismissed or nulled, a criminal charge for which the person has been found not guilty or a conviction for which the person received an absolute pardon, and (3) that any person whose criminal records have been erased pursuant to Section 46b-146, 54-760 or 54-142a shall be deemed to have never been arrested within the meaning of the general statutes with respect to the proceeding so erased and may so swear under oath.

Have you ever been convicted of a crime (exclude minor traffic violations)? YES ( ) NO ( )

If yes, explain on a separate sheet (8.5 X 11). (A conviction is NOT an absolute ban to employment).

**EDUCATION:**

Have you graduated from High School or receive a High School Equivalency Diploma?  
YES ( ) NO ( )

If yes,  
Name & Address: \_\_\_\_\_

If no, circle the highest grade completed:      1   2   3   4   5   6   7   8   9   10   11   12

List education and training you have had since High School in professional or business school, colleges or universities. Include technical, trade, correspondence and military service schools and courses:

<u>School</u>	<u>Courses or Major Field of Study</u>	<u>Received Degree</u>
		Yes ( ) No ( )
		Yes ( ) No ( )
		Yes ( ) No ( )
		Yes ( ) No ( )

**EMPLOYMENT HISTORY:**

List all employment, beginning with more recent, continue on additional sheet if necessary (you may attach a resume in addition to this form).

**Most Recent:**

Employer Firm/Address: \_\_\_\_\_

Supervisors Name: \_\_\_\_\_

Full- or Part-Time: \_\_\_\_\_ Salary: Starting: \_\_\_\_\_ Final: \_\_\_\_\_

Employment Dates: From: \_\_\_\_\_ To: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Position Title: \_\_\_\_\_

Specific Duties: \_\_\_\_\_

\_\_\_\_\_

Employer Firm/Address: \_\_\_\_\_  
 Supervisors Name: \_\_\_\_\_  
 Full- or Part-Time: \_\_\_\_\_ Salary: Starting: \_\_\_\_\_ Final: \_\_\_\_\_  
 Employment Dates: From: \_\_\_\_\_ To: \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_  
 Position Title: \_\_\_\_\_  
 Specific Duties: \_\_\_\_\_  
 \_\_\_\_\_

Employer Firm/Address: \_\_\_\_\_  
 Supervisors Name: \_\_\_\_\_  
 Full- or Part-Time: \_\_\_\_\_ Salary: Starting: \_\_\_\_\_ Final: \_\_\_\_\_  
 Employment Dates: From: \_\_\_\_\_ To: \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_  
 Position Title: \_\_\_\_\_  
 Specific Duties: \_\_\_\_\_  
 \_\_\_\_\_

Other Licenses or skills for position:

Typing Speed (if applicable): \_\_\_\_\_ Dictation Speed (if applicable): \_\_\_\_\_

Office Machines in which you can operate (if applicable): \_\_\_\_\_  
 \_\_\_\_\_

Heavy Equipment which you can operate (if applicable): \_\_\_\_\_  
 \_\_\_\_\_

Driver's License: STATE: \_\_\_\_\_ NUMBER: \_\_\_\_\_  
 TYPE: \_\_\_\_\_

Please list any licenses, certificates, skills or equipment you can operate which would be helpful for the position for which you applied: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

References::

Name	Title	Relationship	Phone Number	Years Known

I affirm that the attached application contains no misrepresentations, or falsifications, omissions, or concealment of material fact, and that the information given by me is true and complete to the best of my knowledge and belief. I am aware that statements made by me on this application are subject to later investigation. I am further aware that should any investigation disclose any such misrepresentations, falsifications, omission or concealment of material fact, my application may be rejected and my name removed from the eligible lists. If already appointed, I may be dismissed.

I hereby authorize and voluntarily release the Town of Branford to conduct any necessary inquiries and collect any necessary information as to my character, reputation, and ability to perform in the position I am applying for, including but not limited to: review of my educational and employment references and background, a criminal conviction history check, a consumer report or investigative consumer report (which will comply with the Fair Credit Reporting Act). I release from any liability any and all former employers or educators, or personal references or other references who supply the Town of Branford with information about my background, education or employment history. I also authorize the release of copies of any such aforementioned records to the Town of Branford.

All employees of the Town of Branford have the right to resign from their jobs at any time, for any reason, or for no reason at all, with or without advance notice. The Town of Branford retains the same right with respect to termination of any employee's employment. No manager, supervisor or other individual of the Town of Branford has authority to make a commitment of guaranteed or continuing employment to you, and no document or publication of the Town of Branford should be interpreted to make such a guarantee. Nothing stated by the Town of Branford, in writing or orally, during the interview and/or hiring process is to be construed as creating a contract between the applicant and the Town of Branford.

I have read, understand and agree to the foregoing.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Social Security No. (Optional): \_\_\_\_\_

Town of Branford

Notice to applicants and employees

EEO

The Town of Branford is an Equal Opportunity Employer. State and Federal law prohibit discrimination on the basis of race, color, religious creed, age, sex, sexual preference, marital status, national origin, ancestry, present or past history or mental or physical disability, except in cases of a bona fide occupational qualification.

PHYSICAL EXAMINATION AND DRUG TEST

I understand that, upon receiving a conditional offer of hire from the Town of Branford, I may be required to pass a physical examination prior to actual employment to verify ability to meet the job requirements.

The Town of Branford is a drug free workplace. The Town of Branford requires successful completion of a urinalysis drug test as part of its post-offer screening process. Drug tests are conducted by an outside professional laboratory.

DISABILITY ACCOMMODATIONS

Under the Americans with Disabilities Act, the Town of Branford is required to provide reasonable accommodations to qualified disabled applicants and employees for the employment process.

Reasonable accommodations will be provided upon request to qualified disabled persons if such accommodations are necessary for applicants to compete equitably in the employment process, or for an employee to perform the essential functions of his or her job.

Requests for such accommodations should be made in a timely fashion to the Human Resources Department so that the Town of Branford can make any necessary arrangements.

NOTICE OF BACKGROUND CHECK AND FAIR CREDIT ACT DISCLOSURE

As part of the hiring process, the Town of Branford will conduct a background check. If you are hired, the Town of Branford may also conduct a background check in deciding whether to continue your employment and when making other employment-related decisions directly affecting you. As part of the background check, the Town of Branford may obtain a "consumer report" from a "consumer reporting agency." These terms are defined in the Fair Credit Reporting Act (FCRA), which applies to you. A consumer report includes information regarding such issues as your credit standing, character and general reputation.

If the Town of Branford obtains a "consumer report" about you and if the Town of Branford considers any information in the "consumer report" when making an employment-related decision that directly and adversely affects you, you will be provided with a copy of the report before the decision is finalized. You may also contact the Federal Trade Commission in Washington, D.C., about your rights under the FCRA as a consumer with regard to "consumer reports" and the "consumer reporting agencies" that prepare these reports.

Because we are required to notify applicants of our policies, we ask that you sign and date this notice.

YOUR APPLICATION WILL BE CONSIDERED INCOMPLETE IF THIS NOTICE IS NOT SIGNED AND DATED

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Town of Branford  
Affirmative Action  
Voluntary Information

In an effort to comply with requirements regarding government recordkeeping, reporting and other legal obligations which may apply, we invite you to complete this applicant survey. Providing this information is strictly voluntary. Failure to provide it will not subject you to any adverse personnel decision or action. Your cooperation is appreciated.

Name (Optional): \_\_\_\_\_

Position(s) Applied for: \_\_\_\_\_ Date: \_\_\_\_\_

Sex:  Female  Male

Describe yourself as one of the following groups:

- White  Black  Hispanic  Asian/Pacific Islander  
 American Indian/Alaskan Native

Referral Source:

- Walk-in  Government Employment Agency  Private Employment Agency  
 Employee  Advertisement – Source: \_\_\_\_\_  
 School  Relative  Other: \_\_\_\_\_