

# Employment Application Town of Branford, Connecticut

Please 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). This application should be typed or legible in blue or black ink.

#### **APPLICANT INFORMATION**

First:	Middle:	Last:			
Address:					
City:	State:	Zip Code	e:		
Email:					
Phone:	Cell 🗆	Cell 🗆 Home 🗆			
Position Applied For:					
Full Time □ Part Time □	Date Available:	//	_		
Are you a citizen of the U.S.? Yes Are you now, or have you ever w	_		rk in the U.S.? Yes $\square$ No $\square$		
If yes, which department?					
Has any member of your family	currently or have been e	mployed by the T	'own? Yes □ No □		
If yes, name:	-				
•	<u>EDUCATION</u>				
High School/ GED	City, State		Did you graduate? Yes □ No □		
College/ Trade	City, State		Did you graduate? Yes □ No □		
_	Degree:		1		
College/ Trade	City, State		Did you graduate?		
	Degree:		Yes □ No □		

College/ Trade	City, State	Did you graduate?	
		Yes □ No □	
	Degree:		

### PREVIOUS EMPLOYMENT

List all employment, beginning wi	th most recent. You n	nay attach a resume in addition to this app	lication.
Company:			
City, State:			
Job Title:			
		Full or Part Time:	
		Supervisors Phone:	
		n for Leaving:	
Responsibilities:			
Company:			
City, State:			
Job Title:			
		Full or Part Time:	
		Supervisors Phone:	
May we contact as a reference: Yes	□ No □ Reaso	n for Leaving:	
Responsibilities:			
Company			
Company:			
City, State:			
Job Title:	То	Full or Part Time:	
		Supervisors Phone:	
		n for Leaving:	
Responsibilities:			
Responsibilities.			
	OTHER LICENS	ES/ SKILLS	
Office Machines in which you can o	parata (if applica	bla).	
Office Machines III which you can c	perate (ii applica	biej	
Heavy Equipment you can operate	(if applicable):		
Driver's License: State:	Number:	Type:	
Please list any licenses, certificatio which you applied:	· ·		position in

## PROFESSIONAL REFERENCES

Name:	Relation:
Phone Number:	Years Known:
Name:	Relation:
Phone Number:	Years Known:
Name:	Relation:
Phone Number:	Years Known:
this application are subject to later investigation. I am further aware that sh falsifications, omission or concealment of material fact, my application may already appointed, I may be dismissed.  I hereby authorize and voluntarily release the Town of Branford to conduct information as to my character, reputation, and ability to perform in the posmy educational and employment references and background, a criminal corconsumer report (which will comply with the Fair Credit Reporting Act). I reducators, or personal references or other references who supply the Town education or employment history. I also authorize the release of copies of all employees of the Town of Branford have the right to resign from their jowithout advance notice. The Town of Branford retains the same right with manager, supervisor or other individual of the Town of Branford has author employment to you, and no document or publication of the Town of Branford stated by the Town of Branford, in writing or orally, during the interview are between the applicant and the Town of Branford.  I have read, understand and agree to the foregoing.	any necessary inquiries and collect any necessary sition I am applying for, including but not limited to: review of the december of the properties of the properties of the properties of Branford with information about my background, my such aforementioned records to the Town of Branford.  The properties of the proper
Applicant Name:	Date:
Signature:	

#### 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 of physical disability, except in cases of a bona fide occupational qualification.

#### PHYSCIAL 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 ACCOMODATIONS**

Under the Americans with Disabilities Act, the Town of Branford is required to provide reasonable accommodations to qualified disable 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 INCOM	MPLETE IF THIS NOTICE IS NOT SIGNED AND DATED
Applicant Name:	Date:
Signature:	



# 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 (option	al):					
Gender:						
Male □ Femal	e: □					
Ethnicity:						
Hispanic □ No	on-Hispanic □					
Race:						
White □	Black/African Americ	an □ A	sian □	Ameri	can Indian □	
Native Hawaiian Pacific Islander □ Two or more Races □						
Referral Sourc	ce:					
Walk In □	Online Job Board □	Relative	□ Empl	oyee □	Town Website □	
Other □						