APPLICATION FOR EMPLOYMENT
TOWN OF BETHEL, CONNECTICUT

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For: _____ **Date of Application:** _____

How Did You Learn About Us?

____ **Advertisement** ____ **Friend** ____ **Walk-In** ____ **Employment Agency** ____ **Relative** ____ **Other** _____

Last Name **First Name** **Middle Name**

**Street** **City** **State** **Zip Code**

Telephone Number(s) **Social Security Number**

If under 18 years, can you provide proof of your eligibility to work? _____ YES _____ NO

Have you ever filed an application with us before: _____ YES _____ NO
If YES, give date _____

Have you ever been employed with us before: _____ YES _____ NO
If YES, give date _____

May we contact your present employer?: _____ YES _____ NO

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?
Proof of citizenship or immigration status will be required upon employment. _____ YES _____ NO

On what date would you be available for work? _____

Are you available to work: _____ Full Time _____ Part Time _____ Shift Work _____ Temporary

Are you currently on "lay-off" status and subject to recall? _____ YES _____ NO

Can you travel if a job required it? _____ YES _____ NO

Educational History

	Elementary School	High School	Undergraduate College/School	Graduate / Professional
School Name & Location				
Years Completed				
Diploma/Degree				
Describe Course of Study				
Describe any specialized training, apprenticeship, skills and extra-curricular activities				
Describe any honors you have received				
State any additional information you feel may be helpful to us in considering your application				

Indicate any foreign languages you can speak, read and/or write	**Fluent**	**Good**	**Fair**
Speak			
Read			
Write			

List professional, trade, business or civic activities and offices held. *You may exclude memberships, which would reveal sex, race, religion, national origin, age, ancestry, or handicap of other protected status:*

_____

_____

_____

Have you ever had any job-related training in the United States military? _____ YES _____ NO
If Yes, please describe:

_____

_____

Can you perform the essential functions of the job for which you are applying, with or without reasonable accommodation?
_____ YES _____ NO

Do you have a valid driver's license? _____ YES _____ NO Operator's # _____

Commercial Drivers License? _____ YES _____ NO Operator's # _____
If a CDL is required for this position, you will be required to provide us with a copy of your CDL.

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations, which indicate race, color, religion, gender, national origin, handicap or other protected status.

Employer	Dated Employed TO FROM	Work Performed
Address		
Telephone #		
Job Title	Supervisor	
Reason for Leaving		

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Address		
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Address		
Telephone #		
Job Title	Supervisor	
Reason for Leaving		

If you need additional space, please continue on a separate sheet of paper.

Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

_____

_____

_____

_____

References

Give name, address and telephone number of three references that are not related to you and are not previous employers.

1. _____
2. _____
3. _____

Applicant's Statement

PLEASE READ: I certify the above information is correct and truthful. I realize, too, that falsification of any information of this application may be grounds for rejection of this application or termination of employment, if the falsification is discovered after employment commenced. I also give consent for you to check with personal references, post-conditional job offer medical records, previous employers and educational institutions concerning my past employment and personal history and to receive reports that may be relevant to my background from other employers and to check criminal and driving records. I release the Town, previous employers and educational institutions from any liability arising from disclosure of information concerning my employment or personal history. I further understand that the acceptance of this form does not constitute an employment agreement. Failure to fill out this application completely may result in my disqualification from any further consideration for employment. Proof of citizenship for employment eligibility in accordance with the Immigration Reform and Control Act of 1986 will be required at time of appointment.

DRUG/ALCOHOL TESTING: The Town of Bethel reserves the right to conduct pre-employment drug and alcohol testing of all applicants. Applicants may be required to pass a test for drugs of abuse and/or alcohol misuse. Failure to pass such tests will result in the withdrawal of any offer of employment.

A PREEMPLOYMENT PHYSICAL MAY BE REQUIRED DEPENDING UPON THE POSITION SOUGHT.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, or Town of Bethel Charter, Ordinance or Collective Bargaining Agreement, any employment relationship with this organization is of an *"at will"* nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this *"at will"* employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

_____ _____

Signature of Applicant Date

Town of Bethel, Connecticut
Clifford J. Hurgin Municipal Center
1 School Street
Bethel, CT 06801
203-794-8501 Fax: 203-778-7520