APPLICATION FOR EMPLOYMENT TOWN OF EAST LYME EQUAL OPPORTUNITY EMPLOYER

It is the policy of the Town of East Lyme to provide equal opportunity without regard to race, color, sex, religion, creed, national origin, ancestry, age, marital status, sexual orientation, political affiliation, or because the employee is a veteran or a qualified individual with a disability. All questions must be answered and application signed.

Last Name		F	irst	Mic	ddle	Date		
E-mail Address Street Address						Home P	Home Phone	
						Cell Pho		
City, State, 2	Zip Code					Busines	s Phone	
Have you ever worked for the Town of Yes No East Lyme?					Social S Number			
If Yes, indic	ate your dates	s of employm	ent and your	reasons for lea	ving:			
Position Des	sired					Pay Exp	Pay Expected	
Can you furn	nish proof of	your right to	work in the U	.S.A.? Yes	_No			
When will y	ou be availab	le to begin w	ork?					
When is the best time to reach you?				May we work?	May we contact you at work?			
Driver's License Number: CDL License? Yes No If Yes, please describe:				Have yo bonded:	ou ever been ?			
If Yes, state	your date of l	birth: Month	No	Day	Year			
Can you furi	nish a Statem	ent of Age/W	orking Paper	as appropriate	? Yes	No		
If hired, is the job duties?	nere anything	which would	prevent you	from reporting	to work each	day on time	to perform your	
Hours Sunday Monday Tuesday Wednesday Thursday Fr						Friday	Saturday	
From								
То								
Would you v Are you will		me Par		Seasonalired? Yes	Tempora No			

Smoking shall be prohibited in all Town-owned buildings, rented space used by Town employees, and any Town-owned vehicle.

Educational Background

School	Name & location of	GPA or	Course of	No. of Years	Did You	Degree or
	School	Class Rank	Study	Completed	Graduate	Diploma
High					Yes	
School						
					No	
College					Yes	
					No	
Other					Yes	
Education						
					No	
Are you going to school now? Yes No If Yes, where?						
Day classe	_					

Are you going to school no	ow? Yes	No	If Yes, where?	
Day classes	Night classes _			

Employment History

The Town of East Lyme reserves the right to contact prior and current employers. Please give accurate, complete, full-time and part-time employment record. Start with your present or most recent employer. Include military experience if applicable. Do not indicate "see resume."

recent employer. Include military experience if applicable. Do	
1 Company Name and Mailing Address	Phone
Job Title and Name of Supervisor	Employed (Month & Year)
	From
	То
Describe your work	Weekly Pay
	Start
	End
Reason for Leaving	•
2 Company Name and Mailing Address	Phone
2 company realite and realiting realities	
Job Title and Name of Supervisor	Employed (Month & Year)
The und That of Supervisor	From
	To
Describe your work	Weekly Pay
2 Country your work	Start
	End
Reason for Leaving	Liid
Troubon for Eduring	
3 Company Name and Mailing Address	Phone
Company Name and Maning Nadiess	
Job Title and Name of Supervisor	Employed (Month & Year)
The and rame of Supervisor	From
	To
Describe your work	Weekly Pay
Describe your work	Start
	End
Reason for Leaving	Lilly
1 11000011 101 200 11115	

to you and are not pr			/work references who are not related sonal references who are not related to			
you.) 1 Name	Address	Phone #	Work/School/Personal			
2 Name	Address	Phone #	Work/School/Personal			
3 Name	Address	Phone #	Work/School/Personal			
5 Special Training	1	L	1			
Per	sonal Computer	Word Processing Softwa	re-Type:			
Fax	Machine	Copy Machine				
Da	ta Entry	Typing	_ Words per Minute			
Dic	etation Equipment	Shorthand	_ Words per Minute			
Otl	ner—Please specify					
6 Please indicate any other relevant training and/or experience you have that is not listed above.						
7 Please List any relevant professional associations and any offices held.						
DISCLOSURE AND ACKNOWLEDGMENT REGARDING PROOF OF AUTHORIZATION TO WORK IN THE UNITED STATES						
I understand that federal law prohibits the employment of unauthorized aliens: all persons hired must submit satisfactory proof of employment authorization and identity: failure to submit such proof will result in denial of employment. I certify by my signature below that I understand that an offer of employment and my continued employment are contingent upon satisfactory proof of my authorization to work in the United States.						
Date:	Sign	nature:				

Printed Name:
DISCLOSURE AND ACKNOWLEDGMENT REGARDING DRIVING HISTORY INFORMATION REQUEST
I certify by my signature below that I understand that if I am offered and accept employment, a driving history information request shall be submitted.
Date : Signature:
Printed Name:
DISCLOSURE AND ACKNOWLEDGMENT REGARDING
AUTHORIZATION TO CONTACT PRIOR AND CURRENT EMPLOYERS
In processing your application for employment and/or in evaluating you for hire, promotion, continuation or retention in employment, or other employment related purposes, the Town of East Lyme may obtain information about you from a prior or current Employer.
By signing this notice you are acknowledging receipt and review of this disclosure.
By signing this notice you are also authorizing the Town of East Lyme or its affiliates or agents to obtain information/opinions about you, from prior or current employers, at any time prior to or during your employment with the Town of East Lyme or its affiliates or agents for purposes of evaluating you for hire, promotion, continuation or retention in employment or any other permissible employment related purposes.
Date: Signature:
Printed Name:
(A photocopy of this authorization is to be accepted as an original.)
DISCLOSURE AND ACKNOWLEDGMENT OF INTENT TO CONDUCT DRUG TEST
Please be advised that prior to making a decision regarding your hire, the Town of East Lyme may conduct a urinalysis drug test as part of the application process if required by your job duties and responsibilities. The urinalysis drug test will be performed using a reliable methodology. The results of any such test shall be confidential and shall not be disclosed by the employer or its employees to any person other than any such employee to whom such disclosure is necessary: the results shall be maintained along with other employee medical records.
I certify by my signature below that I have read and reviewed the "Disclosure of Intent to Conduct Drug Test," and I understand that I may be required to submit to a drug test as part of the application process.
Date: Signature:

Printed Name:				
DISCLOSURE AND ACKNOWLEDGMENT REGARDING CRIMINAL HISTORY CONVICTION INFORMATION REQUEST				
Have you ever been convicted of a crime* (with regard to motor vehicles, include only felony convictions)? If yes, please give charge, location, court date, and describe in full.				
I certify by my signature below that I understand that if I am offered and accept employment, a criminal history conviction information request shall be submitted to confirm the conviction information I have provided in this application.				
Date: Signature:				
Printed Name:				
*Note: The applicant is not required to disclose the existence of any arrest, criminal charge, or conviction, the records of which have been erased pursuant to Sections 46b-146, 54-760, or 54-142a.				
These criminal records subject to erasure pertain to a finding of delinquency or a child's being 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.				
Any person whose criminal records have been erased pursuant to these rules shall not have been considered arrested within the meaning of the Connecticut General Statutes with respect to the erased proceedings and may so swear under oath.				
Conviction of a crime will not necessarily disqualify you from the job for which you are				

applying.

<u>DISCLOSURE OF RIGHTS UNDER THE FAIR CREDIT REPORTING ACT AND</u> AUTHORIZATION TO OBTAIN CREDIT OR CONSUMER INFORMATION

In processing your application for employment and/or in evaluating you for hire, promotion, continuation or retention in employment, or other employment related purposes, the Town of East Lyme may seek credit and/or consumer information about you from a credit reporting agency (CRA) or other sources. This may include the Town of East Lyme or its affiliates or agents requesting information about your character, general reputation, personal characteristics or mode of living, obtained through personal interviews with neighbors, friends, associates, or acquaintances of the consumer. A report containing such information is defined by the Federal Trade Commission as an "investigative consumer report."

The Fair Credit Reporting Act provides you with certain rights whenever an employer or other entity seeks credit or consumer information about you, including information contained in an "investigative consumer report." The attached notice, which is copied from a form developed by the Federal Trade Commission, provides a summary of your rights under the Fair Credit Reporting Act.

By signing this notice you are acknowledging receipt and review of this disclosure and the attached summary of your rights under the Fair Credit Reporting Act.

By signing this notice you are also authorizing the Town of East Lyme or its affiliates or agents to obtain credit or consumer information about you, including an investigative consumer report, at any time prior to or during your employment with the Town of East Lyme or its affiliates or agents for purposes of evaluating you for hire, promotion, continuation or retention in employment or any other permissible employment related purposes.

Date:	Signature:
	Printed Name:

Signature				
I certify that the information given herein is true and complete to the best of my knowledge.				
I understand that this application will be active for a period of 60 days; after that time, if I wish to be considered for employment, I must submit a new application.				
I authorize you to make such investigations and inquiries of the information provided herein, and other matters that relate hereto, as may be necessary. I hereby release employers, schools and other persons, institutions, and businesses from all liability in responding to inquiries in connection with my application. I understand that if I am offered and accept a position, a criminal history conviction information request shall be submitted by the Town of East Lyme to confirm the conviction information I have provide in this application. I understand that false or misleading information given in my application or during my interviews may result in a refusal to hire, or discharge in the event of employment. I understand and agree that, if hired, my employment is at will. I also understand that if I am hired my employment is for no definite period of time. I may terminate my employment at any time and I may be dismissed at any time without prior notice. I further understand and agree that nothing in this application form shall constitute a contract of employment or shall constitute a contract or a guarantee of employment. I also understand that any policies or procedures implemented by the Town of East Lyme in the event of my employment are for purposes of operations only and are not intended to be nor constitute a contract for my employment. In addition, I understand that any of these policies or procedures may be changed at any time at the employer's discretion and without notice.				
Signature Date				
(A photocopy of this authorization is to be accepted as an original.)				
PROCESSING RECORD				
Notes:				
Desiring Officers.				
Position Offered:				
Accepted: Refused: Confirmation Letter Sent:				
PROCESSING RECORD				
LINDIES				

Position Offered:

	D C 1		
Accepted:	Refused:	Confirmation Letter Sent:	