

Town of Windham
979 Main Street
Willimantic, Connecticut 06226



860-465-3006
www.windhamct.com

Employment Application

The Town of Windham is an Equal Opportunity Employer. State and federal law prohibits discrimination on the basis of race, color, religious creed, age, sex (including pregnancy, sexual harassment, sexual orientation, transgender status, gender identity or expression), genetic information, civil union status, marital status, national origin, ancestry, citizenship status, veteran status, physical disability, learning disability, mental disability, intellectual disability, or any other criteria protected under applicable federal, state, or local law.

This policy applies to all areas of employment, including recruitment, advertising, hiring, training and development, classifying, referring, promotion, transfer, termination, layoff, compensation, and all other terms, conditions and privileges of employment in accordance with applicable federal and state laws.

Position Applied For: _____

Date of Application: _____ Date Available: _____

How did you hear about the position? _____

GENERAL INSTRUCTIONS: Please respond to every question on this application form. If a question does not apply to you, write "n/a" in the blank space. If you need more space to respond to a question, please attach a separate sheet.

Last Name First M.I.

Address City State Zip

Home Phone # Cellular Phone # Social Security Number

Email Address: _____

If there is any other name by which you have been known that the Town should be aware of in order to adequately verify your identity, employment history or educational background, please provide any such name (s): _____

Are you either a United States citizen or authorized to work in the United States?

Yes _____ No _____

(Proof of United States Citizenship or authorization to work in the United States will be required upon hiring.)

Employment History

Employer: _____

Employer's Address: _____

Employer's Telephone Number: _____

Title/Position: _____

Job Duties:

Supervisor's Name: _____

Dates Employed: _____

Starting Salary/Wage: _____ Ending Salary/Wage: _____

Reason for Leaving: _____

Employer: _____

Employer's Address: _____

Employer's Telephone Number: _____

Title/Position: _____

Job Duties:

Supervisor's Name: _____

Dates Employed: _____

Starting Salary/Wage: _____ Ending Salary/Wage: _____

Reason for Leaving: _____

Employer: _____

Employer's Address: _____

Employer's Telephone Number: _____

Title/Position: _____

Job Duties: _____

Supervisor's Name: _____

Dates Employed: _____

Starting Salary/Wage: _____ Ending Salary/Wage: _____

Reason for Leaving: _____

Education

Name of School	City/State	Major Course/Subject	Circle Last Year Completed	List Degree Received
G.E.D. Equivalency				
High School/Prep			1 2 3 4	
College			1 2 3 4	
Graduate Work				

Use the space below to provide additional information necessary to describe your full qualifications:

Please list three professional references (at least one must be current):

Name _____ Phone _____

Address _____ Years Known _____

Name _____ Phone _____

Address _____ Years Known _____

Name _____ Phone _____

Address _____ Years Known _____

I certify that there are no misrepresentations, omissions, or falsifications in the statements and answers to the foregoing and/or the attached disclosure forms, and that the responses given are true, complete, and accurate to the best of my knowledge and are made in good faith. I understand that any misrepresentation, omission, falsification and/or misleading information given in my application and/or during any interviews may result in a refusal to hire, or, in the event of employment, discipline and/or termination from employment.

I authorize you to make such investigations and inquiries of the information provided herein, and other related matters, as may be necessary. I authorize you to contact former employers, schools, and/or other persons, institutions and businesses, as appropriate and relevant, at any time for purposes of evaluating me for hire, promotion, continuation or retention in employment or any other permissible employment related purposes. I hereby release employers, schools and other persons, institutions and businesses from all liability in responding to inquiries in connection with my application and employment.

I understand that if I am offered and accept a position the Town of Windham may conduct (1) a criminal history conviction information request to confirm the conviction information I have provided in this application; (2) a urinalysis drug test; and/or (3) a driving history information request. I have read, understood and signed the disclosures that are part of this application.

I understand that acceptance of an offer of employment does not create a contract or guarantee of employment.

Signature

Date

**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 nolle, 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.

**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 INTENT TO CONDUCT DRUG TEST

Please be advised that prior to making a final decision regarding your hire, the Town of Windham intends to conduct a urinalysis drug test as part of the application process. This notice is given and the urinalysis drug test will be conducted in accordance with Connecticut General Statutes §§ 31- 51u et seq. The urinalysis drug test will be performed using a reliable methodology. A positive test result will be confirmed by a second urinalysis drug test, which is separate and independent from the initial test, utilizing a gas chromatography and mass spectrometry methodology or a methodology which has been determined by the Commissioner of Public Health to be as reliable or more reliable than the gas chromatography and mass spectrometry methodology. You will be given a copy of any positive urinalysis drug test result. 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 and shall be subject to the privacy protections provided for in Connecticut General Statutes §§ 31-128a to 31-128h, inclusive. Such results shall be inadmissible in any criminal proceeding.

I certify by my signature below that I have read and reviewed this "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: _____

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**VOLUNTARY INFORMATION
FOR GOVERNMENT MONITORING PURPOSES**

This organization is an Equal Opportunity/Affirmative Action Employer

The information below is needed to measure the effectiveness of our recruitment efforts and is in conformity with federal government guidelines, which require us to compile statistical information about applicants for employment. You are not required to furnish this information, but are encouraged to do so. The law provides that an employer may neither discriminate on the basis of this information, nor on whether you choose to furnish it. However, if you choose not to furnish it, under federal regulations, this employer is required to note race and sex on the basis of visual observation or surname.

This Voluntary Information Sheet will be kept in a confidential file separate from the Application for employment.

POSITION APPLIED FOR: _____

_____ I wish to furnish this information (Please print name) _____

_____ I do not wish to furnish this information (Please print name) _____

Please check appropriate lane: _____ Male _____ Female

ETHNIC CATEGORY (check only one)

_____ White (Not of Hispanic origin)

_____ Hispanic

_____ Asian/Pacific Islander

_____ American Indian/Alaska Native

_____ Black (Not of Hispanic origin)

_____ Other-please specify: _____

How did you hear about this job? Please check one

_____ The Chronicle

_____ Other Newspaper-please specify: _____

_____ Community Agency-please specify: _____

_____ Connecticut Employment Service: _____

DATE: _____

SIGNATURE: _____