TOWN OF RIDGEFIELD, CONNECTICUT

APPLICATION FOR EMPLOYMENT

The Town of Ridgefield is an Equal Opportunity Employer. Except in cases of a bona fide occupational qualification or need, the Town does not discriminate against applicants for employment on the basis of race, color, religious creed, age, sex, sexual orientation, marital status, national origin, ancestry, genetic information, present or past history of mental disorder, mental retardation, learning disability or physical disability, including but not limited to blindness. Minorities, women and Veterans of the Uniformed Services are encouraged to submit applications to the town. If you require reasonable accommodation to complete the application and/or examination process, please contact Human Resources.

(PLEASE PRINT)

Position(s) Applied For:	I Date of Application: I				
Last Name	First Name		Middle Initial		
Present Address	eet	City	State	Zip Code	
Telephone Number(s)					
Email:					
Have you ever been employed with us before	re? □ Yes □ No	f yes give date			
Are you currently employed? □ Yes	□ No May we cor	tact your present employe	er? □ Y	es □ No	
Are you lawfully eligible to work in the Unite	d States? □ Yes □	No			
Are you available to work:	ne 🗆 Part Time	□ Temporary □ On	Call		
On what date would you be available for wo	rk? Can y	ou travel if a job requires if	t? □ Yes	s 🗆 No	
I understand that if offered a position by the screening and police background check to be rescinding of any job offer? Yes No	pe hired. Failure to pass a				
	EDUCATION				
Name and Address of School	Course of Study	Diploma Degree			
Elementary/Middle Schools					
High School					
College					
Other (specify)					

PREVIOUS EMPLOYMENT							
Firm Name/Address/phone #	Date (From – To)	Job Title/Duties	Dorformo				
·		JOB Title/Dutles	Penome	<u>u</u>			
•							
	Reason For Leaving						
	Reason For Leaving						
							
	Reason For Leaving						
	PROFESSIONAL REFERENCES (Preferably not relatives)						
Name	Address/Phone #	Оссі	ıpation				
l							
2							
3							
nereby declare the information provided I							
this information is grounds for refusal t ferenced in this application to give you	any and all information concerning n	ny previous employmer	nt, educati	on or a			
her information that they might have, oplication; and I release all such particular.							
formation to you. I authorize you to requ	est, receive and verify all information	given in this application	n. In con	siderati			
or my employment, I agree to conform to at these rules and regulations may be comployer's sole option and without prior no	hanged, interpreted, withdrawn, or ac						
I,	, agree to be legally bound by	this digital signature.	Yes	No			