



Town Hall
200 Spielman Highway Burlington, CT 06013

APPLICATION FOR EMPLOYMENT

The Town of Burlington, CT (hereafter "Town") is an equal opportunity employer, dedicated to a policy of nondiscrimination in employment on any basis prohibited by law. The Town considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or citizenship status, military or veteran status, sexual orientation, genetic information, or any other legally protected status or characteristic. The Town is committed to providing equal opportunity in compliance with all applicable laws.

PERSONAL INFORMATION

Last Name		First Name		Middle	
Address: Number		Street		City	
				State	
				Zip Code	
Telephone Number(s): Home		Work		Cell	
Email Address:					
Please circle best source above to reach you.					

How did you hear about us? Newspaper Internet Other _____

Are you related to any current or former Town of Burlington employee? Yes No
 If yes, list their name _____

Are you either a U.S. citizen or an alien authorized to work in the United States?
 Are you prevented from lawfully becoming employed in this country because of VISA or immigration status? Yes No

If employment is offered, can you produce documentation required by law to establish work authorization and identity? Yes No

EMPLOYMENT DESIRED

Position(s) applied for: _____ Hourly Rate/Salary desired? _____

On what date would you be available to work? _____ Are you available to work: Full-time Part-time

If Part-time, what days and hours would you be available to work? _____

Can you work overtime if your job requires it? Yes No
 Are there any hours or days you cannot or will not work? If yes, please explain. Yes No

EDUCATION AND TRAINING

	Name and Address of School	Course of Study	Years Completed	Diploma/Degree
Secondary School			5 6 7 8	
High School, Prep School			9 10 11 12	
College, University			1 2 3 4	
Graduate, Trade, Business School				

Describe any specialized training, licenses or certifications: _____

Has any license or certification you have held been surrendered, suspended or revoked for any reason? If so, please explain: _____

EMPLOYMENT EXPERIENCE

Have you ever been dismissed, involuntarily terminated or forced to resign from employment? Yes No

If yes, please explain: _____

Starting with your **most recent employment**, provide your complete employment history for the past 10 years. Include any job-related military service assignments and volunteer activities. Please be aware that your current employer may be contacted unless you ask us not to do so. If you provide a resume that contains some of the requested information, you must nonetheless complete the fields marked by an asterisk (*).

Employer* _____ From _____ To _____

Address _____ Hourly Rate/Salary* _____

Telephone Number(s) _____ Job Title _____

Duties & Accomplishments _____

Supervisor (Name and Title) _____

Reason for leaving/if applicable* _____

Employer* _____ From _____ To _____

Address _____ Hourly Rate/Salary* _____

Telephone Number(s) _____ Job Title _____

Duties & Accomplishments _____

Supervisor (Name and Title) _____

Reason for leaving* _____

Employer* _____ From _____ To _____

Address _____ Hourly Rate/Salary* _____

Telephone Number(s) _____ Job Title _____

Duties & Accomplishments _____

Supervisor (Name and Title) _____

Reason for leaving* _____

Employer* _____ From _____ To _____

Address _____ Hourly Rate/Salary* _____

Telephone Number(s) _____ Job Title _____

Duties & Accomplishments _____

Supervisor (Name and Title) _____

Reason for leaving* _____

Employer* _____ From _____ To _____

Address _____ Hourly Rate/Salary* _____

Telephone Number(s) _____ Job Title _____

Duties & Accomplishments _____

Supervisor (Name and Title) _____

Reason for leaving* _____

(If you need additional space, please continue on back of application or attach additional sheets.)

REFERENCES

Please provide names of 3 professional references, not related to you, whom you have known at least one year and/supervisors.

<u>NAME</u>	<u>TITLE</u>	<u>HOME PHONE</u>	<u>BUSINESS PHONE</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

SKILLS AND EXPERIENCE

State any other skills or experience relevant to the job for which you are applying that you think may be helpful to us in considering your application:

AT-WILL EMPLOYMENT DISCLAIMER AND APPLICANT’S AGREEMENT AND CERTIFICATION

I certify that the answers given in this application are true to the best of my knowledge; I understand that the use of this application form does not indicate that there are any positions open and does not in any way obligate The Town of Burlington, CT (hereafter “Town”).

In consideration of my employment, I agree to conform to the policies and procedures of the Town, as they may from time to time be implemented or revised, and that my employment and compensation are “at-will” and can be terminated with or without cause at any time for any lawful reason at the option of either the Town or myself. I understand that should I be granted an interview, no representations that may be made at the interview are to be construed as creating any obligation, promise or contract on behalf of the Town that in any way would limit the Town’s right to terminate my employment at will. I understand that no supervisory, management or any other employee at the Town, except for the First Selectman, has any authority to make a commitment of guaranteed or continuing employment to me, and no document or publication of the Town or conduct of anyone at the Town should be interpreted to make such a guarantee, unless the First Selectman specifically acknowledges such change in writing.

I understand that misrepresentations, falsifications, or material omissions given in my application, resume, interview or during the course of my employment may result in withdrawal of a job offer or corrective action up to and including termination of employment, whenever the omission or falsification is discovered. I understand that acceptance for employment shall depend on satisfactory replies from my references and other background checks. In the event I receive a job offer, I also understand that I may be subject to a re-employment drug screen.

I have read, understood and agree to the foregoing.

Applicant Signature

Date

NOTICE TO APPLICANTS REGARDING
PRE-EMPLOYMENT DRUG TESTING

Any individual applying for employment with the Town of Burlington, CT (hereafter "the Town") shall submit to a urinalysis drug test as a mandatory part of the employment application process.

This notice serves as a written statement of the Town's intention to conduct such testing as part of the application process. The testing will be conducted by a certified laboratory/testing service selected by the Town, in accordance with the procedures required by applicable state and federal regulations.

Use of alcohol or illegal drugs or being under the influence of alcohol or illegal drugs during work hours or while performing work-related functions is strictly prohibited and can result in immediate termination of employment. Further, refusal to consent to request to take a test for alcohol or drugs during the course of employment may result in termination of employment.

Tested applicants will be given a copy of any positive test result. All test results shall be considered confidential by the Town and shall not be disclosed to the employees of the Town, or any other person, other than to those persons for whom such disclosure is necessary. Positive test results, or a refusal to sign this consent form and participate in pre-employment drug testing, shall be grounds for denial of employment.

Arrangements for testing will be made by a representative of the Town, in consultation with each applicant. Cooperation in scheduling the testing is important for processing an application.

By signing below, you consent to be drug tested and acknowledge you have thoroughly read the foregoing notice and policy, and you understand and agree that in order to be considered for employment with the Town, you will comply in full with the Town's drug testing policy.

Applicant Signature

Date

Print Current Name

AUTHORIZATION TO COLLECT BACKGROUND INFORMATION

I have applied for employment with the Town of Burlington, CT (hereafter "the Town"). I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I authorize representatives of the Town to obtain pertinent information from my previous employers, references, and other persons with knowledge of my work history and background, financial history, education, regulatory or police records, driving records, licensing status or professional designation, and character or reputation, and to consider the information provided by the background check when making decisions regarding my employment at the Town. I authorize all previous employers, references or other persons having knowledge of my record or myself to release such information to the Town, and hereby release all persons from liability for any damage that may result from furnishing such information to the Town. A photocopy of this authorization may be accepted in lieu of the original.

Applicant Signature

Print Current Name

Print Former Name

Dates Used

NOTICE OF BACKGROUND CHECK AND FAIR CREDIT REPORTING ACT DISCLOSURE

As part of the interview process, the Town of Burlington, CT (hereafter “the Town”) may conduct a background check. If you are hired, the Town 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 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, criminal record, motor vehicle record, character and reputation. ** If the Town obtains a “consumer report” about you, and 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.

Your signature below authorizes the Town to obtain consumer reports regarding you from consumer reporting agencies in connection with your application and during the course of your employment. Your signature also acknowledges your receipt of the Summary of Your Rights Under the Fair Credit Reporting Act, which is attached.

Applicant Signature

Date

Print Current Name

Please note that the Consumer Reporting Agency may contact you directly to request additional information needed to perform the background check and that you are required to comply with any such request for information as part of the application process.

****For applicants in Connecticut:** The Town may only obtain and/or use a credit report pertaining to any Connecticut applicants/employees: (a) when the report is required by law; or (b) when the Town reasonably believes the employee engaged in any activity that constitutes a violation of the law related to his/her employment; or (c) when the report is substantially related to the applicant/employee’s current or potential job or when the Town has a bona fide purpose for requesting or using the information in the credit report that is substantially job-related and is disclosed in writing to the applicant/employee.

NOTICE OF EXPIRATION OF JOB APPLICATION

This application for employment will remain active for thirty (30) days. After that time has passed you must reapply for further consideration.

A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

The federal Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness, and privacy of information in the files of every “consumer reporting agency” (CRA). Most CRAs are credit bureaus that gather and sell information about you – such as if you pay your bills on time or have filed bankruptcy – to creditors, employers, landlords, and other businesses. You can find the complete text of the FCRA, 15 U.S.C. §§1681-1681u, at the Federal Trade Commission’s web site (<http://www.ftc.gov>). The FCRA gives you specific rights, as outlined below. You may have additional rights under state law. You may contact a state or local consumer protection agency or a state attorney general to learn those rights.

- **You must be told if information in your file has been used against you.** Anyone who uses information from a CRA to take action against you – such as denying an application for credit, insurance, or employment – must tell you, and give you the name, address, and phone number of the CRA that provided the consumer report.
- **You can find out what is in your file.** At your request, a CRA must give you the information in your file, and a list of everyone who has requested it recently. There is no charge for the report if a person has taken action against you because of information supplied, by the CRA, if you request the report within 60 days of receiving notice of the action. You also are entitled to one free report every twelve months upon request if you certify that (1) you are unemployed and plan to seek employment within 60 days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.
- **You can dispute inaccurate information with the CRA.** If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit, unless your dispute is frivolous. The source must review your evidence and report its finding to the CRA. (The source also must advise national CRAs – to which it has provided the data – of any error.) The CRA must give you a written report of the investigation, and a copy of your report if the investigation results in any change. If the CRA’s investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement is filed, you may ask that anyone who has recently received your report be notified of the change.
- **Inaccurate information must be corrected or deleted.** A CRA must remove or correct inaccurate or unverified information from its files, usually within 30 days after you dispute it. **However, the CRA is not required to remove accurate data from your file unless it is outdated (as described below) or cannot be verified.** If your dispute results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address and phone number of the information source.
- **You can dispute inaccurate items with the source of the information.** If you tell anyone – such as a creditor who reports to a CRA – that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In addition, once you’ve notified the source of the error in writing, it may not continue to report the information if it is, in fact, an error.
- **Outdated information may not be reported.** In most cases, a CRA may not report negative information that is more than seven years old; ten years for bankruptcies.
- **Access to your file is limited.** A CRA may provide information about you only to people with a need recognized by the FCRA – usually to consider an application with a creditor, insurer, employer, landlord, or other business.
- **Your consent is required for reports that are provided to employers or reports that contain medical information.** A CRA may not give out information about you to your employer, or prospective employer, without your written consent. A CRA may not report medical information about you to creditors, insurers, or employers without your permission.
- **You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers.** Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll-free phone number for you to call if you want your name and address removed from future lists. If you call, you must be kept off the lists for two years. If you request, complete, and return the CRA form provided for this purpose, you must be taken off the lists indefinitely.
- **You may seek damages from violators.** If a CRA, a user or (in some cases) a provider of CRA data, violates the FCRA, you may sue them in state or federal court.

The FCRA gives several different federal agencies authority to enforce the FCRA:

FOR QUESTIONS OR CONCERNS REGARDING:	PLEASE CONTACT:
CRAs, creditors and others not listed below	Federal Trade Commission Consumer Response Center –FCRA Washington, DC 20580 202.326.3761
National banks, federal branches/agencies of foreign banks (word “National” or initials “N.A.” appear in or after bank’s name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800.613.6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202.452.3693
Savings associations and federally chartered savings banks (word “Federal” or initials “F.S.B.” appear in federal institution’s name)	Office of Thrift Supervision Consumer Programs Washington, DC 20552 800.842.6929
Federal credit unions (words “Federal Credit Union” appear in institution’s name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Division of Compliance & Consumer Affairs Washington, DC 20429 800.934.FDIC
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation Office of Financial Management Washington, DC 20590 202.366.1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator – GIPSA Washington, DC 20250 202.720.7051

CRIMINAL BACKGROUND

**THIS PORTION OF THE APPLICATION WILL ONLY BE REVIEWED BY MEMBERS
OF HUMAN RESOURCES, THOSE INVOLVED IN INTERVIEWING
THE APPLICANT, AND THE PERSON(S) MAKING THE HIRING DECISION.**

Have you ever been convicted of or pleaded guilty or nolo contendere (no contest) to any violation of any state, federal, county or municipal law, other than a traffic violation.** Yes No

If yes, please give information regarding the nature of the charge, the date and location of conviction and the final disposition of the case:

**Applicants are not required to disclose the existence of an arrest, criminal charge or conviction for which records have been "erased." The types of records subject to erasure under Connecticut law are as follows: (a) a finding of delinquency or that a child was a member of a family with service needs; (b) a sentence as a youthful offender; (c) a criminal charge that was dismissed or "nolled"; (d) a criminal charge for which the person was found not guilty; and (e) a conviction for which the person received an absolute pardon.

Any applicant whose criminal records were erased will be considered to have never been arrested and may so swear under oath. I understand that the information provided above will not necessarily result in the rejection of my application, but that the nature of the information will be considered as it relates to the performance of the job duties in question and in light of the requirements of state and federal law.

Applicant Signature

Date