

MAYOR
MICHAEL J. DOODY

DEPUTY MAYOR
ROSE MARIE ANGELONI

TOWN MANAGER
MICHAEL T. PAULHUS



COUNCIL MEMBERS
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MARIE E. DIAMOND
JOSEPH E. FAUGHNAN
GEORGE I. MILLER
ALFRED D. ROSE
ROBERT VIGLIONE
THOMAS ZAMPANO

TOWN OF NORTH BRANFORD

TOWN HALL, 909 FOXON ROAD, NORTH BRANFORD, CONNECTICUT 06471
TOWN MANAGER (203) 484-6000 TOWN HALL FAX (203) 484-6025

APPLICATION FORM

INSTRUCTIONS FOR COMPLETION

Please complete **all** sections of this application. An incomplete application will not be considered. You may attach additional sheets for your responses. The selection process will involve a review of this application. The Town may require applicants to undergo a job-related testing procedure. Finalists will be invited to participate in a formal interview.

APPLICATION FOR THE POSITION OF:

NAME: _____
Last First Middle Initial

ADDRESS: _____
Street City, State Zip Code

TELEPHONE: _____
Home Cell Work

_____ Email address

PERSONAL DATA:

1. Are you over 18 years of age? Yes [] No []
2. Do you have the legal right to work in the United States? Yes [] No []
3. Have you ever served in the U.S. Armed Forces? Yes [] No []

(IF YES, YOU WILL BE REQUIRED TO PROVIDE A COPY OF YOUR DD214, SHOWING DISCHARGE STATUS)

In compliance with Federal nondiscrimination laws, qualified applicants are considered for all positions without regard to race, color, religion, gender, national origin, age or disability. In addition, the Town complies with applicable state and local laws governing nondiscrimination in employment.

AN EQUAL OPPORTUNITY EMPLOYER M/F



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PERSONAL DATA (continued):

4. Social Security Number: _____
 (Your Social Security Number will be used should a criminal background check be required.)
5. Are you able to perform the essential functions listed in the job description without reasonable accommodation?
 Yes [] No []
- If no, what can be done to accommodate your limitation? _____
6. How did you learn of our organization: _____

EDUCATION

Name of School/Program	Graduated	Type of Degree	Coursework /Major
HIGH SCHOOL	<input type="checkbox"/> YES <input type="checkbox"/> NO		
COLLEGE	<input type="checkbox"/> YES <input type="checkbox"/> NO		
GRADUATE SCHOOL	<input type="checkbox"/> YES <input type="checkbox"/> NO		
TECHNICAL SCHOOL	<input type="checkbox"/> YES <input type="checkbox"/> NO		
OTHER TRAINING OR PROFESSIONAL CERTIFICATIONS (Explain)			

Employment History:

Start with your current or most recent position and work backwards. Use additional sheets of paper if you need more space. **Resumes may be submitted but are not a substitute for the requested information.**

1. _____
 Name of Employer
- _____ Employment Dates
- _____ Job Title
- _____ Final Salary
- Duties and Responsibilities: _____

- Reason for Wanting to Leave: _____
- Name and Title of Immediate Supervisor: _____
- Telephone Number: _____

EMPLOYMENT HISTORY (continued):

2. _____
Name of Employer
_____ Employment Dates

Job Title
_____ Final Salary

Duties and Responsibilities: _____

Reason for Wanting to Leave: _____
Name and Title of Immediate Supervisor: _____
Telephone Number: _____

3. _____
Name of Employer
_____ Employment Dates

Job Title
_____ Final Salary

Duties and Responsibilities: _____

Reason for Wanting to Leave: _____
Name and Title of Immediate Supervisor: _____
Telephone Number: _____

4. _____
Name of Employer
_____ Employment Dates

Job Title
_____ Final Salary

Duties and Responsibilities: _____

Reason for Wanting to Leave: _____
Name and Title of Immediate Supervisor: _____
Telephone Number: _____

May we contact your **present employer** regarding your employment record? Yes [] No []

May we contact your **past employer(s)** regarding your employment record? Yes [] No []

