

## **TOWN OF NORTH BRANFORD**

### **SECRETARY I**

The Town of North Branford is accepting applications from qualified individuals for the position of Secretary I to assist the Purchasing Assistant/Risk Manager in completing clerical, secretarial and record-related work. Requires High School Diploma, supplemented with one year of clerical and/or secretarial experience, or any equivalent combination of experience and training that demonstrates the ability to perform the duties. Prior purchasing and office management experience a plus. Starting wage \$22.20/hr plus benefits.

#### **A COMPLETE APPLICATION INCLUDES:**

- **LETTER OF APPLICATION**
- **TOWN APPLICATION FORM**
- **COMPLETED SUPPLEMENTAL QUESTIONNAIRE**
- **RESUME**
- **OTHER RELEVANT INFORMATION MAY BE ATTACHED**

**Applications must be returned to the Town Manager's Office  
no later than Friday, June 15, 2018 .**

**SECRETARY I** – The Town of North Branford is accepting applications from qualified individuals for the position of Secretary I to assist the Purchasing Assistant/Risk Manager in completing clerical, secretarial and record-related work. Requires High School Diploma, supplemented with one year of clerical/secretarial experience, or equivalent combination of experience and training that demonstrates ability to perform duties. Purchasing, insurance and office management experience a plus, excel preferred. Starting wage \$22.20/hr. plus benefits, 25 hrs per week.

Applications are available at Town Manager's Office, 909 Foxon Road, North Branford, CT 06471 during regular business hours or on-line. Applications due to the Town Manager's Office by **Friday, June 15, 2018 by 4:00 p.m.** (No faxes or emails). EEO/AA

## SUPPLEMENTAL QUESTIONNAIRE

List the work experience, education and/or training from which you gained or developed the following knowledge, skills or abilities. Give examples from your background or how your experience meets the Town's need in each area.

1. Knowledge of office management, office procedures and simple accounting & record-related work.

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2. Ability to maintain comprehensive and accurate records.

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3. Skill in the preparation of draft letters, routine correspondence, and forms.

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4. Computer literacy and experience with MS Word & Excel.

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5. Ability to deal cooperatively and tactfully with the public and other employees.

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MAYOR  
MICHAEL J. DOODY  
DEPUTY MAYOR  
ROSE MARIE ANGELONI  
TOWN MANAGER  
MICHAEL T. PAULHUS



COUNCIL MEMBERS  
ANTHONY S. CANDELORA  
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
- \_\_\_\_\_  
 Job Title
- \_\_\_\_\_  
 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 [ ]

