## 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 I		
Last Name	_ First Name		Middle Initial	
Present Address Number Street		City	State Zip Code	
Telephone Number(s)				
Email:				
Have you ever been employed with us before?	□ Yes □ No	If yes give date		
Are you currently employed? □ Yes □	No May we co	ontact your present employer?	□ Yes □ No	
Are you lawfully eligible to work in the United Sta	ates?   Yes	□ No		
Are you available to work:	□ Part Time	□ Temporary □ On Ca	all	
On what date would you be available for work?	Can	you travel if a job requires it?	□ Yes □ No	
I understand that if offered a position by the Town of Ridgefield, I will be required to pass a post-offer physical, drug-screening and police background check to be hired. Failure to pass any phase of this process may result in the rescinding of any job offer?   Yes  No				
EDUCATION				
Name and Address of School	Course of Study	Years Completed	Diploma Degree	
Elementary School		xxxxx		
High School		XXXXX		
College				
Other (specify)				

PREVIOUS EMPLOYMENT			
Firm Name/Address/phone #	Dates (From – To) Most recent listed in #1	Job Title/Duties Performed	
1	Reason For Leaving		
2	Reason For Leaving		
3	Reason For Leaving		
	PROFESSIONAL REFERENCES (Preferably not relatives)	3	
Name	Phone #/E-mail	Occupational Relationship to You	
4			
1			
		<del></del>	
3			
of this information is grounds for refusal referenced in this application to give you other information that they might have, application; and I release all such parti information to you. I authorize you to requ for my employment, I agree to conform to	to hire, or if hired, termination. I au any and all information concerning personal or otherwise, with regal ies from all liability for any dama- uest, receive and verify all information the rules and regulations set forth in changed, interpreted, withdrawn, or	complete, and I understand that falsification athorize any of the persons or organizations my previous employment, education or any rd to any of the subjects covered by this ge which may result from furnishing such on given in this application. In consideration the Employee Handbook and acknowledge added to by the employer at any time at the	
Signature of Applicant		Date	