



Is any member of your immediate family now employed by the Town of North Haven?

YES ( ) NO ( ) If Yes, Name \_\_\_\_\_

Are you currently employed? YES ( ) NO ( ) If yes, may we inquire of your present employer?

YES ( ) NO ( )

**Employment Information:**

Are you physically and mentally able to perform the essential functions of the job applied for? YES ( ) NO ( )

If no, is there any accommodation that would allow you to perform this job? YES ( ) NO ( )  
If yes, please explain?

\_\_\_\_\_

**Educational History:**

	Elementary	High School	College	Trade School	Other
School Name					
Years Completed					
Diploma/Degree Received?					
Subjects Studied					

Describe specialized training, apprenticeship, skills or extra-curricular activities that relate to the position for which you are applying (omit any activities that would disclose your race, religion or other protected class):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Driver Information:**

Certain positions with the Town of North Haven require employees to drive. If you are applying for a position which requires driving, please answer the following:

Do you have a valid driver's license? Yes ( ) No ( )

If Yes - license no. \_\_\_\_\_ State \_\_\_\_\_ Expiration date \_\_\_\_\_

Do you have a CDL? Yes ( ) No ( ) If yes, Class A or B? \_\_\_\_\_ and Number \_\_\_\_\_.

Has your license ever been revoked or suspended? Yes \_\_\_ No\_\_\_

**Other Licenses or Skills:**

Typing skill (if applicable) \_\_\_\_\_ WPM

Computer skill (if applicable) list all computer systems and programs you are proficient in:

\_\_\_\_\_

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List office equipment you can operate (if applicable)

\_\_\_\_\_

Heavy equipment which you can operate (if applicable) \_\_\_\_\_

\_\_\_\_\_

**Employment History - DO NOT LEAVE BLANK**

List below your employment history. Start with your most recent employer first. Attach an additional sheet if necessary.

Current/Most recent Employer: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name & Title of Supervisor: \_\_\_\_\_ May we contact? \_\_\_\_\_

Your Title: \_\_\_\_\_

Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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Current/Most recent Employer: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name & Title of Supervisor: \_\_\_\_\_ May we contact? \_\_\_\_\_

Your Title: \_\_\_\_\_

Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name & Title of Supervisor: \_\_\_\_\_ May we contact? \_\_\_\_\_

Your Title: \_\_\_\_\_

Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name & Title of Supervisor: \_\_\_\_\_ May we contact? \_\_\_\_\_

Your Title: \_\_\_\_\_

Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name & Title of Supervisor: \_\_\_\_\_ May we contact? \_\_\_\_\_

Your Title: \_\_\_\_\_

Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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Current/Most recent Employer: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name & Title of Supervisor: \_\_\_\_\_ May we contact? \_\_\_\_\_

Your Title: \_\_\_\_\_

Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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Current/Most recent Employer: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name & Title of Supervisor: \_\_\_\_\_ May we contact? \_\_\_\_\_

Your Title: \_\_\_\_\_

Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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**References**

Name	Title	Relationship	Telephone	Nu of Yrs

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**APPLICANT'S CERTIFICATIONS AND AGREEMENTS**

**TO ALL APPLICANTS: PLEASE READ THIS SECTION CAREFULLY AND SIGNIFY YOUR UNDERSTANDING BY SIGNING YOUR NAME IN THE SPACE PROVIDED.**

I certify that all of the statements made by me on this application for employment are true, correct, and complete to the best of my knowledge. I understand that any falsification or material omission of fact on this application shall lead to refusal of employment or dismissal from employment. I authorize any investigation into the statements I have made in this application as necessary to arrive at an employment decision. In consideration of my employment, I agree to conform to the rules, regulations and policies of the Town of North Haven.

I authorize representatives of the Town of North Haven to obtain pertinent information from my previous employers, references, and other persons with knowledge of my work history and background. I authorize my previous employers, references, and persons with knowledge of my work history and background to provide pertinent information to the Town of North Haven and hereby release all such persons and waive any and all claims, demand or causes of action whatsoever, in connection with the request for release of such information. I also voluntarily agree to submit to any lawful security examination or investigation as a condition precedent to employment or at any time during my employment. I hereby release the Town of North Haven, its agents and employees from any liability resulting from or in connection with the results or use of the results of any of the above described examinations, reference checks and investigations.

I understand that, as a condition precedent to employment, the Town of North Haven conducts thorough background checks (which may include a check of my criminal history) on prospective employees. I agree that, if contacted with respect to such background check, that I will fully cooperate and provide any information requested. I understand that, as a condition of my consideration for employment with the Town of North Haven, or as a condition of my continued employment with the Town of North Haven, the Town of North Haven may obtain a consumer report that includes, but is not limited to, my creditworthiness or similar characteristics, employment and education verifications, social security verification, criminal and civil history, personal interviews, DMV records, any other public records and any other information bearing on my credit standing, credit capacity, character, general reputation, personal characteristics and trustworthiness.

I hereby authorize and consent to the Town of North Haven's procurement of such a report. I understand that, pursuant to the federal Fair Credit Reporting Act, the Town of North Haven will provide me with a copy of any such report if the information contained in such report is, in any way, to be used in making a decision regarding my fitness for employment with the Town of North Haven. I further understand that such report will be made available to me prior to any such decision being made, along with the name and address of the reporting agency that produced the report.

As a condition precedent to employment, I voluntarily consent to a controlled substance test in accordance with applicable law and understand that a positive and properly confirmed drug test for controlled substances or refusal to submit to a drug test is grounds for denial or termination of employment. I also voluntarily consent to a pre-employment medical examination conducted at the request of the Town of North Haven. I understand that the results of these medical examinations and tests will be provided to the Town of North Haven.

I have read, understand and agree to the forgoing.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PLEASE PRINT NAME