

Application for Employment

Instructions to Applicant: Read the detailed instructions on the position/job posting before completing this application form. Type or print answers to <u>ALL</u> questions.

Personal and Contact Inform	iation				
(Last Name)			(First Name)	
(Address Number, Street, Ap	ot.)		(City, S	tate, Zip)	
List other names you have use	ed:				
(E-mail	Address)				
(Primary Phone)	OK to leave r	message?	Yes	No	
(Alternate Phone)	(Extension)	OK to leave	message?	Yes	No
State Position/Job Posting					
Job Title:			Job Pos	ting Numbe	er:
Location:					
Applicant Certification					
SIGNATURE REQUIRED: By that the statements made by complete to the best of my king misstatement of fact, I am subbe prescribed by law or persemployment information, are s	me on this a nowledge and a ject to disqualifi onnel regulation	pplication form re made in go cation and disr ns. All statem	and attachrod faith. I ur nissal and to ents made c	ments, if anderstand such other other other other other on this app	any, are true and that if I make any r penalties as may
Applicant Signature:(Sign	ature is required in ord	der for your applicati	on to be considere	Date:	

Employment Preferences and Language Fluency

You are required to select one of the following: I am a current State of CT employee

I am a former State of CT employee

I have never been a State of CT employee

If you are and/or were a State of CT employee, please enter your 6 digit employee ID number: _____

Danbury-Henry Abbott

Name of current agency and/or last agency employed: __

Are you lawfully permitted to work in the United States? Yes No

In which locations will you accept employment:



All Locations Manchester-Howell Cheney

Ansonia-Emmett O'Brien Meriden-H.C. Wilcox

Bridgeport-Bullard Havens Middletown-Vinal

Bristol-Bristol T.E.C. Milford-Platt

Danielson-H.H. Ellis Norwich-Norwich

Groton-E.T. Grasso Stamford-J.M. Wright

Hamden-Eli Whitney Stratford-Stratford Aviation

Hartford-A.I. Prince Torrington-Oliver Wolcott

Hartford-CT Aero Tech Waterbury-W.F. Kaynor

Willimantic-Windham

New Britain-E.C. Goodwin

Are you available for? Check all that are applicable:

Full-Time Durational Seasonal Per Diem

Part-Time Temporary Internship

Available for shift preferences? Check all that are applicable:

First Second Weekends

Are you fluent in a language other than English? If required for the job for which you are applying:

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Last Name	First Name

Education and Training

In order to receive educational credits toward qualification for the job posting, the institution must be accredited.

If the institution of higher learning is located outside of the United States, you are responsible for providing documentation from a recognized USA accrediting service which specializes in determining foreign education equivalencies. The responsibility for and the costs associated with obtaining this equivalency information rest with the applicant. If applicable, please email the document to the Recruiter listed in the job opening.

High School Education

Did you graduate from high school or receive a high school equivalency diploma (GED)?

Yes No

College and Graduate School Education

1							
	(Nan	ne of School)			(Street Address, City,	State and Zip)	
	Major and/or Min	or:					
	Degree Earned:	Yes	No Atte	ending	# of Credits E	arned:	
	Degree Type:	Associate	Bachelor	- Master	Doctorate	Law	None
2.	(Nan	ne of School)			(Street Address, City,	State and Zip)	
	Major and/or Mine	or:					
	Degree Earned:	Yes	No Att	ending	# of Credits I	Earned:	
	Degree Type:	Associate	Bachelor	n Master	Doctorate	Law	None
3.	(Nam	e of School)			(Street Address, City,	State, and Zip))
	Major and/or Mine	or:					
	Degree Earned:	Yes	No Atte	ending	# of Credits E	arned:	
	Degree Type:	Associate	Bacheloi	r Master	Doctorate	Law	None

Attach additional sheets (labeled with "Education and Training – continued" and include your name in upper right corner) if you attended more than three (3) colleges/universities.

Last Name	First Name

Education and Training (continued)

Special	ized T	raining	or	Classes	Relevant	to	Job
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1.		
••	(Name of Organization, Company, School)	(City, State, Country)
	(Type of degree or	r certificate earned)
2.		
	(Name of School Attended)	(City, State, Country)
	(Type of degree o	r certificate earned)
Lic	enses and Professional Certificates	
		censes, certificates, or permits you possess applicable
	•	plumbing, teaching, coaching, educational etc.)
1.	Type:	Number:
	Issued By:	Expiration Date:
2.	Туре:	Number:
	Issued By:	Expiration Date:
3.	Type:	Number:
	Issued By:	Expiration Date:
4.	Туре:	Number:
	Issued By:	Expiration Date:
5.	Do you currently have a valid Motor Ve	ehicle Driver's License (Class D)? Yes No
	List any endorsement(s) to your Class	D license:
	,(=, == , = = = 0.0.00	
6.	Do you currently have a valid Commerc	` '
	CDL Class: Endorsement(s	s):

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Last Name	First Name

Work Experience/Employment History

Important Instructions

- Please list beginning with your most recent position, all of your work experience including military service and all
 volunteer activities that you wish to be considered toward meeting the eligibility requirements (minimum
 qualifications) stated on the opening.
- Please do not submit a resume in lieu of completing this portion of the application.
- Be sure that the information included in this section demonstrates that you meet the experience qualifications for the job for which you are applying.
- Failure to provide all of the REQUIRED information for each position may result in your application being disapproved.
- Please make sure to list each position held, even with the same employer.
- If you need additional space for the descriptions of your duties for one or more positions, attach an 8 1/2" x 11" sheet with your name and continue the descriptions of your duties, using the number sequence to identify which positions the duties belong to.

JOB 1	(1	Most Recent Job Title)		Dates: From	(MM/YY)	_ To_ (MM/YY	or Present)
	(I	Employer's Name)		(Em	nployer's Addre	ss)	
	(Supervi	sor's Name)	(Super	visor's Title)		(Supervisor's	Phone)
(Wee	kly Hours)	Yes No Supervise Others	(N	umber and Titles)		Yes May We Cor	No ntact Employer
Rea	son for L	eaving:					

Job Duties

Last Name	First Name

Work Experience/Employment History (continued)

B 2(Job Title)	Dates: From	To
(Job Title)	(MN	M/YY) (MM/YY)
(Employer's Name)	(Employer	's Address)
(Supervisor's Name)	(Supervisor's Title)	(Supervisor's Phone)
Weekly Hours) Yes No	(Number and Titles)	Yes No May We Contact Employe
Reason for Leaving:		
	Job Duties	
		_
B 3(Job Title)	Dates: From (MN	Tо
(Employer's Name)	(Employer	's Address)
(Supervisor's Name)	(Supervisor's Title)	(Supervisor's Phone)
Yes No	(Number and Titles)	Yes No
(Weekly Hours) Supervise Others		YES NO May We Contact Employe

Job Duties

	r
Last Name	First Name

Work Experience/Employment History (continued)

Dates: From(MM/	To
(Employer's	s Address)
(Supervisor's Title)	(Supervisor's Phone)
(Number and Titles)	Yes No May We Contact Employe
Job Duties	
Dates: From(MN	To
(Employer	's Address)
(Supervisor's Title)	(Supervisor's Phone)
	(Supervisor's Title) (Number and Titles) Job Duties Dates: From(MM

Job Duties

Voluntary Equal Employment Opportunity Information

To further its commitment to equal opportunity employment and meet State and Federal reporting requirements, the State of Connecticut requests applicants to VOLUNTARILY provide the following information. This information will be used for statistical purposes only by authorized personnel and will not be considered in the evaluation of your application.

A. GENDER

Female

Male

Decline to State

B. ETHNICITY

Hispanic or Latino

Not Hispanic or Latino

Decline to State

C. RACE

Please select from one of the following

American Indian or Alaskan Native: Origins in any of the original peoples of North or South America, including Central America, and who maintains tribal affiliations or community attachment

Asian: Origins in any of the original peoples of the Far East, Southeast Asia the Indian subcontinent, including for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam

Black/African American (Non Hispanic): Persons having origins in any of the black racial groups of Africa

Native Hawaiian or Other Pacific Islander: Origins in the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands

WHITE (Non Hispanic): Origins in any of the original peoples of Europe, the Middle East, or North Africa

Two or more races

Decline to State