TOWN OF CROMWELL APPLICATION FOR EMPLOYMENT

The Town of Cromwell is an equal opportunity employer, dedicated to a policy of nondiscrimination in employment on any basis prohibited by law. The Town of Cromwell considers applicants for all positions without regard to race, color, religion, gender, national origin/ancestry, age, disability, marital or civil union party status, sexual orientation or any other legally protected status.

	PERSONAL INFOR	MATION				
Full Name:						
Last Name	First Name		Middl	e		
Address:						
Number Street		City	State		Zip	
Telephone Number(s):						
Home	Work		Cell			-
Email Address:						
How did you hear about us?	Newspaper	Internet	Other			
Are you either a U.S. citizen or a Are you prevented from lawfully				Yes	No	
Visa or immigration status	becoming employed in t	ins country of	cause of	Yes	No	
If employment is offered, can yo	u produce documentation	required by l	aw to			
establish work authorization and	identity?			Yes	No	
	EMPLOYMENT D	ESIRED				_
Position (s) applied for:						
Hourly Rate/ Salary desired?						
On what date would you be available	le to work? A	are you availab	le to work	Full	time	Part time
Can you work overtime if your job	requires it?				Yes	No
Can you travel if your work require	s it?				Yes	No
Have you ever been dismissed, invo If yes, please explain on the next page	· · · · · · · · · · · · · · · · · · ·	ed to resign fro	om employm	ent?	Yes	No

EDUCATION AND TRAINING

Completed	Name and Address of School	Course of Study	Diploma/Degree
High School:			
University: _			
Graduate:			
Professional 7	Frade:		
Business Scho	ool:		
Academic Sch	nolarships / Awards:		
Describe any	specialized training, licenses or certific	cations:	
Has any licens	se or certification you have held been s	urrendered, suspended or revoke	d for any reason?
If so, please ex	xplain:		
	EMPLOYN	MENT EXPERIENCE	
contacted unle	litary service assignments and voluntous ss you ask us not to do so. If you provimplete the fields marked by an asterisk (de a resume that contains some of	
Employer*		From:	To:
Address:			
Telephone Nu	mber(s):	Job Title:	
Duties & Acc	omplishments:		
Supervisor (N	ame and Title)		
Reason for lea	aving*		
Employer*		From:	To:
Address:			
Telephone Nu	mber(s):	Job Title:	
Duties & Acc	omplishments:		
Supervisor (N	ame and Title)		
Reason for lea	nving*		

EMPLOYMENT EXPERIENCE (CONTINUED)

Employer*	From:	To:	
Address:			
Telephone Number(s):	Job Title:		
Duties & Accomplishments:			
Supervisor (Name and Title):			
Reason for leaving*			
Employer*			
Address:			
Telephone Number(s):	Job Title:		
Duties & Accomplishments:			
Supervisor (Name and Title):			
Reason for leaving*			
Employer*	From:	To:	
Address:			
Telephone Number(s):	Job Title:		
Duties & Accomplishments:			
Supervisor (Name and Title):			
Reason for leaving*			
Employer*			
Address:			
Telephone Number(s):	Job Title:		
Duties & Accomplishments:			
Supervisor (Name and Title):			
Reason for leaving*			

REFERENCES

Please provide names of 3 professional references, not related to you, whom you have known at least one year.

Name	Title	Home Phone	Business Phone
1			
2			
J			
	SKILLS A	AND EXPERIENCE	
any other skills or experience	e relevant to the job for which you	are applying that you think may be	e helpful to us in considering your applica
	APPLICANT'S AGR	EEMENT AND CERTIF	ICATION
•	•	•	nowledge. I understand that false of
•			(s) or during the course of m to and including termination of
	•	• •	d that acceptance for employmen
			nd checks. In the event I receive
-		_	edical examination that I must pas
before I commence w	ork.		
	NDEDSTOOD AND AC	DEE TA THE EADECA	INC
THAVE KEAD, U	INDERSTOOD AND AG	REE TO THE FOREGO	IIIG.
Signature of Applica	ant	Date	
	Empil occurrent de la contra	. Moil completed!	nation to
	Email completed form to bprice@cromwellct.com	Attn: Human Resource	
	rleonardo@cromwellct.com	m Town of Cromwell	

Town of Cromwell 41 West Street Cromwell, CT 06416