



Town of Thomaston  
 158 Main Street  
 Thomaston, Connecticut 06787  
 Phone: 860-283-9678 Fax: 860-283-1378

## Application for Employment

**Date:** \_\_\_\_\_

**INSTRUCTIONS:**

Read the detailed instructions on the final page of this application and on the examination announcement before completing this application form. Type or print answers to ALL questions.

NAME (Last)	(First)	(MI)	SUFFIX (JR., DR.)
ADDRESS (Number and Street)			
CITY		STATE	ZIP CODE (Last 4 digits are optional)
AREA CODE	HOME PHONE NUMBER		
Cellular Phone Number:		E-mail Address:	
May we call you at work? <input type="checkbox"/> Yes <input type="checkbox"/> No		Drivers Licennse <input type="checkbox"/> Yes <input type="checkbox"/> No	
What kind of position are you applying for? <input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Either			Position Applying for:
EDUCATION: Have you graduated from High School or received a High School equivalency diploma? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If No, circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12			
SCHOOL	NAME	ADDRESS	DID YOU GRADUATE?
TECHNICAL OR BUSINESS			
COLLEGE OR UNIVERSITY			
OTHER EDUCATION			
<b>OTHER LICENSES OR CERTIFICATES REQUIRED FOR THIS POSITION (E.G., Assessor, Tax Collector, Engineering)</b>			
KIND(S)	ISSUED BY	DATE ISSUED	NO.
Do you speak, read or write a language other than English? <input type="checkbox"/> Yes (specify language) _____ (This information is voluntary.)			

**INSTRUCTIONS**

Beginning with your **PRESENT OR MOST RECENT** employment or volunteer experience and **working backward**, list all positions held **which are necessary for determining your eligibility for employment**. List all positions (titles) separately, even if with the same employer. Clearly describe the work (duties) you personally performed. If additional space is required, attach an 8 1/2" x 11" sheet, **using the same format**. Continue the number sequence for additional jobs listed. **You must fill out this application completely even if a resume is being attached.**

Official Job title (Start with most recent job)		Company Name		Type of Business	
Title of Immediate Supervisor		Dept. Where Assigned		Business Address/Phone No.	
Employed From (Mo.) (Yr.)	To: (Mo.) (Yr.)	Total (Yrs. Mos.)	Hours Per Week (Full time) (Part-time)		
No. and Titles of Employees Supervised by You			Reason for Leaving		
DUTIES (must be listed)					
Official Job title		Company Name		Type of Business	
Title of Immediate Supervisor		Dept. Where Assigned		Business Address/Phone No.	
Employed From (Mo.) (Yr.)	To: (Mo.) (Yr.)	Total (Yrs. Mos.)	Hours Per Week (Full time) (Part-time)		
No. and Titles of Employees Supervised by You			Reason for Leaving		
DUTIES (must be listed)					
Official Job title		Company Name		Type of Business	
Title of Immediate Supervisor		Dept. Where Assigned		Business Address/Phone No.	
Employed From (Mo.) (Yr.)	To: (Mo.) (Yr.)	Total (Yrs. Mos.)	Hours Per Week (Full time) (Part-time)		
No. and Titles of Employees Supervised by You			Reason for Leaving		
DUTIES (must be listed)					

**APPLICANT DATA**

Answers to the following question will be considered for employment purposes if relevant to the position for which you are applying.

- 1. Please check appropriate box:
  - a. May we contact your present employer? Yes                      No
  - b. Were you ever dismissed or discharged from any employment for reasons other than lack of work or funds? Yes                      No
  - c. Did you ever resign from any employment rather than face dismissal? Yes                      No
  - d. Did you ever receive a discharge form the Armed Forces of the United States which was other than "Honorable", or which was issued under other than honorable circumstances? Yes                      No

None of the above circumstances represents an automatic bar to employment. Each case is considered and evaluated on individual merits in relation to the duties and responsibility of the position(s) you are applying.

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**APPLICANT'S CERTIFICATION AND AGREEMENT**

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize Town of Thomaston to verify their accuracy and to obtain reference information on my work performance.

I hereby release Town of Thomaston from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of the Employer. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract.

I understand that any employment offered is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause.

SIGNED: \_\_\_\_\_

DATE: \_\_\_\_\_