

# TOWN OF NEWINGTON

*Police Department, 71 Fox Point Road 03801*

## APPLICATION FOR EMPLOYMENT

*Employees of the Town and applicants for employment shall be afforded equal opportunity in all aspects of employment without regard to race, color, religion, sex, national origin, age, marital status, or disability.*

The Town of Newington will make reasonable effort in the employment process to accommodate persons with disabilities. If you will require special accommodations during the application/hiring process, please notify Human Resources prior to the deadline for submitting an application for this position.

*Applications remain active for a maximum of one (1) year.*

(Please Print or Type)

Date:

### POSITION DATA

Position applied for:

Department:

Availability Date:

Full-time

Part-time

Seasonal

### BIOGRAPHICAL DATA

Full Name:

Social Security #:

Street Address:

Home Phone: (     )

City:

State:

Zip:

Work Phone: (     )

Have you ever been employed with us before? No   
Yes

If yes, provide details below.

Title of Position held:

Termination Date:

Reasons for leaving:

List any relative currently working for the Town of Newington:

Name

Department

Relationship

Do you have a legal right to accept employment in the United States? Yes  No

If you are under 18 years of age, can you provide required proof of your eligibility to work?

Yes  No

### EDUCATION

Did you receive a high school diploma or GED?

Yes  No

Circle highest grade completed: 7 8 9 10 11 12

College: 1 2 3 4 5 6

	School (name, city, state)	Dates	Degree	Course of Study
High School				
Undergraduate College/University				
Graduate/Professional College/University				
Other Education (i.e., Technical, Business)				

**AN EQUAL OPPORTUNITY EMPLOYER**

<b>EMPLOYMENT HISTORY</b> (List most recent employer first)	
Company:	Your Title:
Street Address:	Employed From (date):
City, State, Zip:	Employed To (date):
May we contact your present employer? Yes [ ] No [ ]	Current Salary or Rate of Pay: Starting: _____ Per _____ Ending _____
Responsibilities:	
Supervisor's name:	Phone No.:
Reasons for leaving:	

Company:	Your Title:
Street Address:	Employed From:
City, State, Zip:	Employed To:
Salary or Rate of Pay:	Starting: _____ Ending: _____
Responsibilities:	
Supervisor's name:	Phone No.:
Reasons for leaving:	

Company:	Your Title:
Street Address:	Employed From:
City, State, Zip:	Employed To:
Salary or Rate of Pay:	Starting: _____ Ending: _____
Responsibilities:	
Supervisor's name:	Phone No.:
Reasons for leaving:	

<b>CRIMINAL HISTORY</b>
Have you ever been convicted of a crime that has not been expunged by a court? Yes [ ] No [ ]
If Yes, explain fully (Conviction will not automatically disqualify you from employment. Each situation is considered on its individual merit. Lack of explanation or failure to complete this section may be a basis for rejection of this application):

## REFERENCES

List three (3) personal References who are not former employers or related to you:

Name & Occupation	Address	Phone	Relationship

## CERTIFICATION AND AGREEMENT

PLEASE READ CAREFULLY BEFORE SIGNING

In submitting this application for consideration and as indicated by my signature below, I hereby certify that all responses provided herein and throughout the application process are true and complete to the best of my knowledge. I authorize the Town of Newington and/or its authorized agent(s) to investigate my personal and employment history, and financial and credit record. I further authorize investigation of all statements contained in this application for employment as may be deemed necessary in arriving at an employment decision. I understand that should an investigation at any time disclose any misrepresentations and/or falsifications as stated herein, upon any other employment-related form or made during an interview(s), my application will be rejected and should I become or already be employed with the Town of Newington, my employment may be terminated.

I understand that if I am employed by the Town of Newington, I am required to become familiar with and abide by all rules and regulations of the Town of Newington as established and amended from time to time. I understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship established with the Town of Newington is of an "at will" nature, which means that the employee may resign at any time and the Town of Newington may discharge the employee at any time with or without cause. I further understand that this "at will" employment relationship may not be changed by written instrument or by conduct unless such change is specifically acknowledged, in writing, by an authorized representative of the Town of Newington.

I release any individual, including record custodians, from any and all liability for damages of whatever kind or nature that may, at any time, happen to me as a result of compliance, or any attempts to comply with this authorization.

\_\_\_\_\_  
(Applicant's Signature)

\_\_\_\_\_  
(Date)

**The Town of Newington is an Equal Opportunity Employer**