Application for Employment



Equal access to programs, services and employment is available to all persons. Those applicants requiring accommodations to the application and/or interview process should contact a representative of the Personnel Department.

PLEASE PRINT

Position(s) applied for			Date of application		/ /	
Name		First		Middle		
Address	Street		City	State		Zip Code
Telephone ()			Social	Security Number		
If you are under 18, can Have you ever been emp Are you legally eligible i (Proof of U.S. citizenshi) Date available for work	loyed here before?. for employment in o or immigration sta	this country? atus will be required up	oon employment.)		Yes Yes	No No No
Type of employment des Are you able to meet the Have you ever plead "gu (Answering "yes" to these question applied for will be taken into consid If yes, please provide dat	ired Full-ti attendance requires ilty" or "no contest s does not constitute an aut leration.)	me Part-Time ments of the position?. " to, or been convicted omatic bar to employment. Factor	Temporary of a crime? rs such as date of the offense,	Seasonal seriousness and nature of	Edu Yes Yes the violatio	Icational Co-Op No No on, rehabilitation and position
Driver's license number	(if job related)				State	
Employment His List your last three (3) er	story					litary experience.
From	То	Employer		Telephone		
Job Title	1	Address		I		
Immediate Supervisor and Title		Summarize the nature of work performed and job responsibilities				

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Reason for Leaving		Hourly Rate/Salary			
		Start \$ per Final \$	per		
From	То	Employer	Telephone		
Job Title		Address			
Immediate Supervisor and Title		Summarize the nature of work performed and job responsibilities			
Reason for Leaving		Hourly Rate/Salary Start \$ per Final \$ per			
From	То	Employer	Telephone		
Job Title		Address			
Immediate Supervisor and Title		Summarize the nature of work performed and job responsibilities			
Reason for Leaving		Hourly Rate/Salary Start \$ per Final \$	per		

Skills and Qualifications

Summarize any training, skills, license, certificates and/or characteristics of yourself that may qualify you as being able to perform job-related functions for the position which you are applying______

Educational Background (if job related)

Name and Location	Years Completed	Did You Graduate?		Course of Study
High School				
College		Major	Degree	
Other				

Date of Spring Break (if in school) / /

References

Name	Telephone	Years Known
	()	
	()	

APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to cancel further consideration of this application, or immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the City of Bridgeport does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application will be active for a period of one year; after that time, if I wish to be considered for employment, I must submit a new application.

If I am hired, I understand that I am free to resign at any time, with or without prior notice, and the City of Bridgeport reserves the right to terminate my employment at any time, with our without cause and without prior notice, except as may be required by law. This application does not constitute and agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the City of Bridgeport is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the Bridgeport City Manager.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant

_____ Date _____

The City of Bridgeport considers all applicants for positions without regard to race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve/national guard or any other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria. 5/06