



**TOWN OF ELLINGTON**  
 55 Main Street  
 P. O. Box 187  
 Ellington, Connecticut 06029-0187

[www.ellington-ct.gov](http://www.ellington-ct.gov)

## APPLICATION FOR EMPLOYMENT

You must fill out this application completely even if a resume is being attached.

The Town of Ellington (the "Town") is an equal opportunity employer, dedicated to a policy of nondiscrimination in employment on any basis prohibited by law. The Town considers applicants for all positions without regard to race, color, religion, gender, national origin/ancestry, age, disability, marital status, military/veteran status, sexual orientation, gender identity/expression, genetic information or any other legally protected status. The Town will provide equal opportunity in compliance with all applicable laws.

### PERSONAL AND POSITION INFORMATION

Last Name		First Name		Middle		
Address		Number	Street	City	State	Zip Code
Telephone Number(s): Home		Work		Mobile		
Email Address:						

Position(s) applied for: \_\_\_\_\_ Hourly Rate/Salary desired? \_\_\_\_\_

How did you hear about us?  Newspaper  Internet  Other \_\_\_\_\_

On what date would you be available to work? \_\_\_\_\_ Are you available to work:  Full-time  Part-time

Are there any hours or days that you cannot or will not work? \_\_\_\_\_

Are you at least 18 years old?  Yes  No

If employment is offered, can you produce documentation required by law to establish work authorization and identity?  Yes  No

Are you currently on "lay-off" status and subject to recall?  Yes  No

Can you work overtime if your job requires it?  Yes  No

Can you travel if your job requires it?  Yes  No

Do you have reliable transportation to and from work?  Yes  No

If your job requires you to use a personal vehicle, would you have one to use?  Yes  No

Can you provide a valid driver's license and proof of insurance if required to drive?  Yes  No

Have you ever applied to or worked at the Town before?  Yes  No

If yes, list dates of employment, location/department/position and (if applicable) former name:

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Do you have any friends or relatives working at the Town?  Yes  No

If yes, list name and relationship to you:

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### EDUCATION AND TRAINING

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Have you graduated from High School or received a High School equivalency diploma?  Yes  No

If no, circle the highest grade completed: 9 10 11 / High School Name: \_\_\_\_\_

School	Name and Address of School	Course of Study	Years Completed	Diploma/Degree
Technical/ Trade or Business				
College or University				
Graduate or Professional				

Academic Scholarships/Awards \_\_\_\_\_

Describe any licenses or certifications (type, which State(s), date(s) \_\_\_\_\_

Has any license or certification you have held been surrendered, suspended or revoked for any reason? \_\_\_\_\_

If so, please explain: \_\_\_\_\_

Military Service (Dates, Branch, Characterization of Discharge) \_\_\_\_\_

List any skills or knowledge relevant to the job for which you are applying that you think may be helpful to us in considering your application:

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**EMPLOYMENT EXPERIENCE**

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Have you ever been dismissed, involuntarily terminated or terminated by mutual agreement?  Yes  No

Have you ever been asked/forced to resign or given choice to resign rather than termination?  Yes  No

If yes to either question, please explain (continue on back if necessary):

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Starting with your *most recent employment*, provide your **complete** employment history for the past 10 years. Include any job-related military service assignments and volunteer activities. **You must complete this section even if you provide a resume.** Please be aware that your current and previous employers may be contacted.

Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

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 \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number(s) \_\_\_\_\_ Job Title \_\_\_\_\_

Duties & Accomplishments \_\_\_\_\_

Supervisor (Name and Title) \_\_\_\_\_

Reason for leaving \_\_\_\_\_

(If you need additional space, please continue on back of application or attach additional sheets.)

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## PROFESSIONAL REFERENCES

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

Name & Title	Company Name
Address	Telephone Number

Name & Title	Company Name
Address	Telephone Number

Name & Title	Company Name
Address	Telephone Number

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### NOTICE TO APPLICANTS REGARDING PRE-EMPLOYMENT DRUG AND/OR ALCOHOL TESTING

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Any individual applying for employment with the Town of Ellington (“The Town”) may be required to submit to a urinalysis drug test or alcohol testing as a mandatory part of the employment application process. This notice serves as a written statement of the Town’s intention to conduct drug and/or alcohol testing as part of the application process. The testing will be conducted in accordance with the procedures required by applicable state and federal regulations. Tested applicants will be given a copy of any positive test result. All test results shall be considered confidential by the Town and shall not be disclosed to the employees of the Town, or any other person, other than to those persons for whom such disclosure is necessary or as otherwise required by law. Positive test results, or a refusal to sign this consent form and participate in pre-employment drug and/or alcohol testing, shall be grounds for denial of employment. Arrangements for testing will be made by a representative of the Town, in consultation with each applicant. Cooperation in scheduling the testing is important for processing an application.

By signing below, you consent to be drug and/or alcohol tested and acknowledge you have thoroughly read the foregoing notice and policy, and you understand and agree that in order to be considered for employment with the Town, you will comply in full with the Town’s drug and alcohol policies.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

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**AT-WILL EMPLOYMENT DISCLAIMER AND APPLICANT’S AGREEMENT AND CERTIFICATION**

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I certify that the answers given in this application are true to the best of my knowledge. I understand that the use of this application form does not indicate that there are any positions open and does not in any way obligate the Town of Ellington (hereafter “the Town”) to employ me.

*In the event I become employed and in consideration of my employment, I agree to conform to the policies and procedures of the Town, as they may from time to time be implemented or revised, and that unless I am covered by an applicable collective bargaining agreement or individual written contract, my employment and compensation are “at-will” and that my employment can be terminated with or without cause at any time for any lawful reason at the option of either the Town or myself.* I understand that should I be granted an interview, no representations that may be made at the interview are to be construed as creating any obligation, promise or contract on behalf of the Town that in any way would limit the Town’s right to terminate my employment at will. I understand that no supervisory, management or any other employee at the Town has any authority to make a commitment of guaranteed or continuing employment to me, and no document or publication of the Town or conduct of anyone at the Town should be interpreted to make such a guarantee.

I understand that false or misleading information given in my application, resume, interview or during the course of my employment may result in withdrawal of a job offer or discipline up to and including termination of employment, whenever the omission or falsehood is discovered. I understand that acceptance for employment shall depend on satisfactory replies from my references and any other required background checks or pre-employment tests. I understand that if I am paid a weekly salary rather than an hourly rate, my salary is intended to compensate me for all hours I work, including any hours in excess of 40 hours in a work week.

**I have read, understood and agree to the foregoing.**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_