
SPECIALIZED TRAINING OR SKILLS

List any special qualifications or certifications/licenses which you feel may especially qualify you for the position for which you are applying (include seminars, areas of research, special awards and professional memberships):

Please list all computer software and other office equipment that you use:

Use the space below to provide additional information necessary to describe your full qualifications:

MILITARY SERVICE RECORD

Were you in the U.S. Armed Forces? YES _____ NO _____ If YES, what branch? _____

Dates of Duty: From _____ to _____ Rank at Discharge: _____
(Month/ Day/ Year) (Month/ Day/ Year)

List duties in the service, including special training:

REFERENCES

List below 3 individuals (not relatives) who know your character, ability, and experience:

NAME	ADDRESS	PHONE #	RELATIONSHIP	YEARS ACQUAINTED

EMPLOYMENT HISTORY

In the space below, give your employment history beginning with your most recent employer and work back listing all previous employers. Include any applicable voluntary positions. Use additional sheets of plain paper if you need more space.

Name of Employer: _____ Phone: _____

Address: _____

Name & Title of Supervisor: _____

Your Job Title: _____ Employed: Full Time _____ Part Time _____

Employed From: _____ / _____ To _____ / _____
Month Year Month Year

Duties & Responsibilities: _____

Reason for Leaving: _____

Name of Employer: _____ Phone: _____

Address: _____

Name & Title of Supervisor: _____

Your Job Title: _____ Employed: Full Time _____ Part Time _____

Employed From: _____ / _____ To _____ / _____
Month Year Month Year

Duties & Responsibilities: _____

Reason for Leaving: _____

Name of Employer: _____ Phone: _____

Address: _____

Name & Title of Supervisor: _____

Your Job Title: _____ Employed: Full Time _____ Part Time _____

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Month Year Month Year

Duties & Responsibilities: _____

Reason for Leaving: _____

Name of Employer: _____ Phone: _____

Address: _____

Name & Title of Supervisor: _____

Your Job Title: _____ Employed: Full Time _____ Part Time _____

Employed From: _____ / _____ To _____ / _____
Month Year Month Year

Duties & Responsibilities: _____

Reason for Leaving: _____

Have you ever been fired or asked to resign from a job? YES _____ NO _____ If YES, please explain:

May we contact your present employer? YES _____ NO _____

CERTIFICATION: By signing below I certify that the information I have provided on this application is correct, complete and truthful. I realize that falsification of any of this information may be grounds for rejection of this application, or termination of employment, depending upon when the falsification is discovered.

I also give consent for you to check with previous employers and the personal references and release the City, previous employers and personal references from any liability arising from disclosure of information concerning my past employment or personal history.

Drug Testing: I understand that the City of Torrington requires all job applicants who are given a conditional job offer to successfully pass a urinalysis drug test.

Criminal Records Check: I understand that the City of Torrington requires all job applicants who are given a conditional job offer to successfully pass a criminal records check.

I further understand the acceptance of this form does not constitute an employment agreement and that only the Personnel Director of the City of Torrington is authorized to extend an offer of employment that shall be rendered in writing.

SIGNATURE: _____

DATE: _____

**CITY OF TORRINGTON, CONNECTICUT
VOLUNTARY AFFIRMATIVE ACTION QUESTIONNAIRE**

As an Affirmative Action Employer the City of Torrington has a responsibility to comply with Federal and State-mandated regulations. We ask your cooperation in completing the following questionnaire to help us meet government record keeping and reporting requirements. Data will be kept in an affirmative action file separate from your application for employment. **YOUR COOPERATION IN COMPLETING THIS PORTION OF THE EMPLOYMENT APPLICATION IS VOLUNTARY.** Your decision not to include data will not affect any employment decisions.

Position Applied For: _____

Sex: Male _____ Female _____

Race/Ethnic Group:

White _____ Black _____ Hispanic _____

American Indian/Alaskan Native _____ Asian/Pacific Islander _____

Other _____ (Please specify) _____

How did you hear about this job opening?

Register Citizen _____

Current employee _____
(Name: _____)

Hartford Courant _____

Professional publication _____
(Please specify: _____)

Waterbury Republican _____

Professional organization _____
(Please specify: _____)

CT Employment Service _____

City Hall Posting _____

Internet _____
(Please specify: _____)

Walk In _____

NAME: _____

DATE: _____