

Town of Berlin APPLICATION FOR EMPLOYMENT

The Town of Berlin is an equal employment opportunity/affirmative action employer and intends to recruit, hire, train and promote without regard to race, color, sex, age, religion, national and ethnic origin, disability, marital status, sexual orientation, veteran status or any other protected class under applicable law.

Name (Last)		(First)		(Middle Initia		
Address (Street Name and Number	er)	(City)		(State)	(Zip Code)	
Telephone Number - Daytime	Telephone Nun	nber - Evening	Cell Pho	ne		
Email address						
Position Applied for:			Date	Availal	ole:	
☐ Full Time	☐ Part	Time				
What is your desired Salary:	\$	to	\$			
Beginning with current or mo United States military service Name, Address and Phone Number of				<u> </u>	e of Supervisor	
Employer						

EDUCATION (Please complete in full. Do not reference resume.)

Name and Address of In	stitution	# of Years Completed	Degree Earned	Field	of Study
List any special skills and/or tr	ade or profession	al licenses relev	ant to the job appl	ied for:	
List any job related training (in	ncluding military	training) releva	nt to the job applie	d for:	
REFERENCES (Please com List at least three (3) reference for the job for which you are a	es who can provid			lated to your o	qualifications
Name	Address and	Phone Number	Relationship	to You # o	of Years Known

Please Read Carefully Before Signing

I certify that there are no misrepresentations, omissions or falsifications in the contained statements and answers provided on this application, and that the answers are true, complete and accurate to the best of my knowledge. I understand that false statements made by me on this application will be sufficient cause for termination from employment. I further understand that this application form is not a contract of employment.

I authorize the Town of Berlin to contact any of the educators, employers and references listed on this application, as well as those not specifically listed, and authorize such educators, employers and references to release to the Town of Berlin any and all information (including documents and/or other records) regarding my education, employment history or any other matter related to my application for employment with the Town.

Pursuant to the Immigration and Reform Control Act of 1986, all applicants, upon being made an offer of employment, must produce documentation specified by the federal government establishing identity and authorization of employment in the United States. This documentation must be produced no later than 72 hours following commencement of employment. I will be required to sign a Form I-9 (Employment Eligibility Verification) verifying, under oath, my employment authorization.

I understand that the Town adheres to the principle of "employment at will", which allows either party to terminate the employment relationship at any time for any reason. If hired, I agree to abide by any and all Town policies, procedures and regulations.

I understand that offers of employment may be conting physical, drug screen and background investigation.	ent upon successful completion of a pre-employme	nt
Signature		
<u> </u>		

Once completed, this application can be mailed, dropped off, or emailed to:

Town of Berlin
Town Manager's Office
240 Kensington Road
Berlin, CT 06037
csullivan@berlinct.gov

Thank you for completing this application form and for your interest in the Town of Berlin. Employment will be subject to satisfactory reference evaluation and any other pre-employment exam that is appropriate for the position.