TOWN OF EAST HARTFORD



740 Main Street
East Hartford, Connecticut 06108
hrinformation@easthartfordct.gov

Phone (860)291-7220

APPLICATION FOR REVIEW OF QUALIFICATIONS

Equal Opportunity Employer

Please review the announced requirements for the position and answer all questions.

POSITION APPLIED FOR		DEPARTMENT			
APPLICANT'S NAME (LAST, FIRST, MIDI	DI E)				
STREET ADDRESS CI		TY/TOWN	STATE/ZIP		
TELEPHONE NUMBER (HOME)		TELEPHONE NUMBER (WORK/CONTACT)			
PRESENT JOB TITLE		LENGTH OF TIME IN POSITION			
EMAIL ADDRESS					
	EDUC				
List all colleges, business schools or techni-	cal schools you atte	ended in chronological order, most re	cent listed first:		
School	Address	Course/Major	Degree/Certificate		
details related to the job for which you are a certification you have that would be relevan	ipplying. List any o	ffice equipment you can operate or a	ny licenses or state ecessary):		
I certify that the statements made by me o understand that any falsification of facts will Signature:	subject me to disqu	are true, complete and correct to the ralification or dismissal. Date:			
	DATE OF HIRE				
TO BE COMPLETED BY Human Resources Department	SENIORITY DA	TE			
	GRADE/STEP				

Signed_

Review of Qualification Pg. 2
List below in chronological order (most recent dates first) each place you have been employed, please do not omit any (attach additional sheet(s) if needed). Give correct full addresses, and dates of non-employment include all part-time employment.

IMPORTANT: Ma	y we contact y	our present em	ployer? 📙 YE	<u>S</u> [NO		
Name of Employer			Job Title				
Address		City		State		Zip Code	
Dates of Employment:	Name and Title of Supervisor Telephone Number						
From to	Description of duties, responsibilities, and significant accomplishments:						
To to year							
Salary:	-					- 1	
Starting \$ per		·	-				
Ending \$per	9	ā					
Number Hours Worked Weekly	Reason For	r Leaving					
Name of Employer			Job Title				
Address		City		State		Zip Code	
Dates of Employment:	Name and	 Title of Supervis	or		Telephone Number		
From to	Description	Description of duties, responsibilities, and significant accomplishments:				ments:	
Toto							
Salary:							
Starting \$ per							
Ending \$ per			., B.,	-			
Number Hours Worked Weekly	Reason For	Leaving					
Name of Employer	-		Job Title				
Address		City		State		Zip Code	
Dates of Employment:	Name and Title of Supervisor			Telephone Number			
From to	Description	Description of duties, responsibilities, and significant accomplishments:					
To to		-	-				
Salary:							
Starting \$ per						·	
Ending \$ per							
Number Hours Worked Weekly	Reason For	•					
hereby certify that the statements mission or misrepresentation would rough this application whenever sepends upon satisfactory completic authorize all persons and companiot it is on their records, and hereby own of East Hartford I will compactices. The Town of East Hartford actices as a contract.	d allow for my be such falsification on of a qualifying es named above, release them fro oly with all rules	eing discontinued from the discovered. Further examination procest, except my present all liability for data and regulations.	om the selection purther, I understands. ss. t employer if so not mage in providing the stablished or amo	rocess and that recently to find the first that the	and/or for dismissal fing employment by the urnish any information agrithment of the govern Town employments.	rom employment obtaine Town of East Harting regarding me whethe ee that if employed by ployees and employed by	

Date_