

Application for Employment

Park and Recreation Department

**Town of Darien
2 Renshaw Road
Darien, CT 06820**

We consider applicants for all positions without regard to race, color, religion, creed, sex, ancestry or national origin, age, physical or mental handicaps, marital or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT)

Last Name		First Name		Middle Name	
Address	Number	Street	City	State	Zip Code
Home Telephone		Business Telephone		Cell Phone	Email Address

Please check the position(s) you are applying for:

- Lifeguard Seasonal Maintenance Clerical Full-time maintenance
 Administrative Instructional Other

Are you at least 16 years of age? Yes No

When are you available for work? _____

Until what date? (Applies to seasonal applicants only) _____

Have you ever been employed with us before? Yes No
If yes, give the dates of employment _____

Are you available to work: Full time Part time Temporary

Have you ever been convicted of a crime or are there criminal charges currently pending against you? YES []
You may omit: (1) traffic violations and (2) any offense committed before your 21st birthday which was finally adjudicated in a juvenile court or under a Youth Offender law. NO []

If your answer is "Yes", detail each offense on a separate piece of paper indicating the: (1) date, (2) charge, (3) place, (4) court, and (5) action taken. NOTE: A conviction does not automatically disqualify for you a position. The nature of the crime, the relevance to the position applied for, evidence of rehabilitation and the length of time since the crime occurred will be considered. Failure to give complete or accurate information concerning prior convictions can result in the withdrawal of a job offer or the termination of your employment. The Town reserves the right to obtain an investigative consumer report including information on your character, employment history, police record and motor vehicle record.

References

Give name, address and telephone number of three personal or professional references who are not related to you and are not previous employers.

1. _____
2. _____
3. _____

Employment Experience

1.	Employer	Dates Employed	Type of Work Performed

Address _____			

Telephone Number(s) _____			

Job Title		Supervisor	

Reason for leaving		Salary or Hourly Rate of Pay	

May we contact this employer? _____ Yes _____ No			

2.	Employer	Dates Employed	Type of Work Performed

Address _____			

Telephone Number(s) _____			

Job Title		Supervisor	

Reason for leaving		Salary or Hourly Rate of Pay	

May we contact this employer? _____ Yes _____ No			

Education

Name and Address of School	Course of Study	Years Completed or Degree/Certification
High School _____	_____	_____
College _____	_____	_____
Other _____	_____	_____

Additional Information

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

Specialized Equipment Operational Skills

Production/Mobile Machinery (list):

Office:

PC Fax
 Microsoft Word Microsoft Excel
 Other _____

Lifeguard Applicants: Please check the following certifications in your possession and list dates of expiration:

Institution:

Date of Expiration:

Lifeguarding	<input type="checkbox"/>	_____
First Aid	<input type="checkbox"/>	_____
CPR for the Professional Rescuer	<input type="checkbox"/>	_____
American Heart CPR	<input type="checkbox"/>	_____
Other _____		_____

DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING

Can you perform the essential functions of the job for which you are applying, with or without reasonable accommodation? If not, please explain. Also, if you need a reasonable accommodation to do the job for which you have applied, please explain.

FOR DEPARTMENT USE ONLY

Arrange interview Yes No

Remarks:

Employed: Yes No Date of Employment: _____

Job Title: _____

Hourly rate/Salary: _____

Department: _____

By: _____

EMPLOYEE CERTIFICATIONS AND AGREEMENTS

I understand that a positive and properly confirmed drug test for controlled substances or refusal to submit to a drug test is grounds for denial and if a properly confirmed pre-employment drug test is reported after I have begun employment, it may be grounds for termination of any employment for just cause under the terms of any applicable collective bargaining agreement.

I authorize representatives of the Town of Darien to obtain pertinent information from my previous employers, references, and other persons with knowledge of my work history and background. I authorize my previous employers, references, and persons with knowledge of my work history and background to provide pertinent information to and hereby release all such persons and waive any and all claims, demands or causes of action whatsoever, in connection with the request for and release of information.

I understand that the Town of Darien may obtain a consumer report and/or an investigative consumer report including information concerning my character, employment history, general reputation, personal characteristics, police records, and motor vehicle record in connection with my application.

I certify that the information on this job application is true and complete to the best of my knowledge. I understand that any willful omissions or falsifications will be reason for withdrawal of a job offer if the omission or falsehood is discovered before I begin employment, and if discovered after I have begun employment, it may be grounds for termination of my employment for just cause under the terms of any applicable bargaining agreement. I authorize any investigation into the statements I have made in this application as necessary to arrive at an employment decision.

All employees of the Town of Darien have the right to resign from their jobs at any time, or for any reason or for no reason at all, with or without advance notice. The Town of Darien retains the same right with respect to termination of any employee's employment. No department head, supervisor or other individual of the Town of Darien has authority to make a commitment of guaranteed or continuing employment to you, and no document or publication of the Town of Darien should be interpreted to make such a guarantee. **NOTHING STATED BY THE TOWN OF DARIEN, IN WRITING OR ORALLY, DURING THE INTERVIEW AND/OR HIRING PROCESS IS TO BE CONSTRUED AS CREATING A CONTRACT BETWEEN THE APPLICANT AND THE TOWN OF DARIEN.**

I have read, understand and agree to the foregoing.

Signature of Applicant

Date

**NOTICE TO APPLICANTS/EMPLOYEES REGARDING
CONSUMER REPORTS**

A consumer report and/or an investigative consumer report including information concerning your character, employment history, general reputation, personal characteristics, police record, education, qualifications, motor vehicle record, mode of living, and/or credit and indebtedness may be obtained in connection with your application for and/or continued employment with the company. **A consumer report and/or an investigative consumer report may be obtained at any time during the application process or during your employment with the Company.** A consumer report containing injury and illness records and medical information may be obtained after a tentative offer of employment has been made. Upon timely written request of the Personnel Department of the Company, and within 5 days of the request, the name, address and phone number of the reporting agency and the nature and scope of the investigative consumer report will be disclosed to you. Before any adverse action is taken, based in whole or in part on the information contained in the consumer report, you will be provided a copy of the report, the name, address and telephone number of the reporting agency, a summary of your rights under the Fair Credit Reporting Act, as well as additional information on your rights under the law.

Print your name

Signature

Date

The following is for identification purposes only to perform the background check:

Birth date

Other names (maiden)

A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

The federal Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness, and privacy of information in the files of every “consumer reporting agency” (CRA). Most CRAs are credit bureaus that gather and sell information about you—such as if you pay your bills on time or have filed bankruptcy—to creditors, employers, landlords, and other businesses. You can find the complete text of the FCRA, 15 U.S.C. §§1681-1681u, at the Federal Trade Commission’s website (<http://www.ftc.gov>). The FCRA gives you specific rights, as outlined below. You may have additional rights under state law. You may contact a state or local consumer protection agency or a state attorney general to learn those rights.

- **You must be told if information in your file has been used against you.** Anyone who uses information from a CRA to take action against you—such as denying an application for credit, insurance, or employment—must tell you and give you the name, address, and phone number of the CRA that provided the consumer report.
- **You can find out what is in your file.** At your request, a CRA must give you the information in your file, and a list of everyone who has requested it recently. There is no charge for the report if a person has taken action against you because of information supplied by the CRA, if you request the report within 60 days of receiving notice of the action. You are also entitled to one free report every twelve months upon request if you verify that (1) you are unemployed and plan to seek employment within 60 days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.
- **You can dispute inaccurate information with the CRA.** If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit, unless your dispute is frivolous. The source must review your evidence and report its findings to the CRA. (The source also must advise national CRAs—to which it has provided the data—of any error.) The CRA must give you a written report of the investigation, and a copy of your report if the investigation results in any change. If the CRA's investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement is filed, you may ask that anyone who has recently received your report be notified of the change.
- **Inaccurate information must be corrected or deleted.** A CRA must remove or correct inaccurate or unverified information from its files, usually within 30 days after you dispute it. **However, the CRA is not required to remove accurate data from your file unless it is outdated (as described below) or cannot be verified.** If your dispute results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address and phone number of the information source.
- **You can dispute inaccurate items with the source of the information.** If you tell anyone—such as a creditor who reports to a CRA—that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In addition, once you’ve notified the source of the error in writing, it may not continue to report the information if it is, in fact, an error.
- **Outdated information may not be reported.** In most cases, a CRA may not report negative information that is more than seven years old; ten years for bankruptcies.
- **Access to your file is limited.** A CRA may provide information about you only to people with a need recognized by the FCRA—usually to consider an application with a creditor, insurer, employer, landlord, or other business.
- **Your consent is required for reports that are provided to employers, or reports that contain medical information.** A CRA may not give out information about you to your employer, or prospective employer, without your written consent. A CRA may not report medical information about you to creditors, insurers, or employers without your permission.
- **You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers.** Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll-free phone number for you to call if you want your name and address removed from future lists. If you call, you must be kept off the lists for two years. If you request, complete, and return the CRA form provided for this purpose, you must be taken off the lists indefinitely.
- **You may seek damages from violators.** If a CRA, a user or (in some cases) a provider of CRA data, violates the FCRA, you may sue them in state or federal court.

The FCRA gives several different federal agencies authority to enforce the FCRA:

FOR QUESTIONS OR CONCERNS REGARDING:

CRA's, creditors and others not listed below **PLEASE CONTACT**
Federal Trade Commission
Consumer Response Center - FCRA
Washington, DC 20580 * 202-326-3761

FOR QUESTIONS OR CONCERNS REGARDING:

National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name) **PLEASE CONTACT**
Office of the Comptroller of the Currency
Compliance Management, Mail Stop 6-6
Washington, DC 20219 * 800-613-6743

FOR QUESTIONS OR CONCERNS REGARDING:

Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks) **PLEASE CONTACT**
Federal Reserve Board
Division of Consumer & Community Affairs
Washington, DC 20551 * 202-452-3693

FOR QUESTIONS OR CONCERNS REGARDING:

Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name) **PLEASE CONTACT**
Office of Thrift Supervision
Consumer Programs
Washington, DC 20552 * 800-842-6929

FOR QUESTIONS OR CONCERNS REGARDING:

Federal credit unions (words "Federal Credit Union" appear in institution's name) **PLEASE CONTACT**
National Credit Union Administration
1775 Duke Street
Alexandria, VA 22314 * 703-518-6360

FOR QUESTIONS OR CONCERNS REGARDING:

State-chartered banks that are not members of the Federal Reserve System **PLEASE CONTACT**
Federal Deposit Insurance Corporation
Division of Compliance & Consumer Affairs
Washington, DC 20429 * 800-934-FDIC

FOR QUESTIONS OR CONCERNS REGARDING:

Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission **PLEASE CONTACT**
Department of Transportation
Office of Financial Management
Washington, DC 20590 * 202-366-1306

FOR QUESTIONS OR CONCERNS REGARDING:

Activities subject to the Packers and Stockyards Act, 1921 **PLEASE CONTACT**
Department of Agriculture
Office of Deputy Administrator-GIPSA
Washington, DC 20250 * 202-720-7051