# CITY OF WATERBURY CIVIL SERVICE



236 Grand Street, Room 202 Waterbury CT 06702 Tel 203-574-6761 Fax 203-574-8087

APPLICATION FOR EXAMINATION OR EMPLOYMENT

(PLEASE TYPE OR PRINT CLEARLY IN INK)

**Position Applying for** (Use Title on Job Announcement)

Exam Number (Use # on Job Announcement)

## **INSTRUCTIONS (PLEASE READ CAREFULLY)**

- 1. Obtain a copy of the examination announcement before completing this application. Carefully review the job announcement and the General Conditions listed on the back of the announcement. In order to be considered for the position, you must meet the minimum qualifications listed on the announcement and follow the instructions on this application and the job announcement.
- 2. Applications (and exam materials, if required) must be received in Human Resources by the closing date. Late or incomplete application packages will not be accepted. Resumes may be included as a supplement to the application <u>but will not</u> <u>substitute for any information required on the application form.</u>
- 3. Applications are only accepted for open positions. An application received for a position not open and posted will not be considered for employment.
- 4. Give complete and accurate information about your training and experience as it relates to the minimum qualifications.
- 5. Bring, send or fax your application and any required materials or certifications to the address above. Retain a copy of your application package for your records.

# **GENERAL INFORMATION**

Name:				
(Last)	(First)	(Middle)	L	ast 4 Digits SSN
Address:				
(Street/Apt#)	(City)	(State)	(Zip)	
Home Telephone:	Work Telep	hone		
(Area Code)		(Area Code)		
Cellular Telephone:	Email Addre	ess:		
(Area Code)				
May we call you at work? Yes	No Best daytime contact:	Home Work	Cell	
, ,				
Are you or have you ever been emplo	ved by the City of Waterbury?	□ Yes □ No		
(If yes, please give dates of employm				
(If yes, please give dates of employing	ent and job title and Department	II		
Have you applied for employment wi	th the City of Waterbury in the	past? 🗌 Yes 🗌 No		
Do you speak, read or write a languag	ge other than English? [] Yes	□ No		(specify language)
A 1 11 (1 · 1) 1 ·				
Are you legally authorized to work in		No No		
Note: Verification of identity and emp		lime of nire.		
Are you at least 18 years old?  Ye	S NO			
	CIVIL SERVICE OF	FICE USE ONLY		
Q		F	Res Pts Yes	No
NQ Educ Exp	Other.	$\mathbf{v}$	/ets Pts (5) Yes_	
Rejected			/ets Pts (10) Yes_	
Comments	· · · · · · · · · · · · · · · · · · ·	2	Sen. Pts	
Reviewed hy:	Date <sup>.</sup>	F	?ank <sup>.</sup>	

#### **EMPLOYMENT HISTORY**

Beginning with your PRESENT OR MOST RECENT employment experience and working backward, list **all positions** held for the past 10 years, including any job related military experience or volunteer activities and **list any gaps in employment to include a reason**. In addition to the positions you held over the past 10 years you should also list any prior employment, even if more than 10 years ago, which is necessary for determining your eligibility for employment as stated on the exam announcement. List all positions (Name/ Titles) separately, even if with the same employer. Clearly describe the work (duties) you personally performed. If additional space is required, **attach a Supplemental Employment History form or use space provided on page 3**. Note that failing to disclose any employment during the past 10 years is considered a material omission and may be grounds for withdrawal of a job offer or dismissal whenever discovered.

#### (Start with most recent job)

Official Job Name/Title		Company Name
Name/Title of Immediate Supervisor		Dept. Where Assigned
Business Address/Phone #		
Employed From / To / Total / Mon / Yr Mon / Yr Total / Yrs / Mons		
Reason for Leaving?		
DUTIES (must be listed):		
Official Job Name/Title		_ Company Name
Name/Title of Immediate Supervisor		_ Dept. Where Assigned
Business Address/Phone #		
Employed From / To / To / Total / Mon / Yr Total / Yrs / Mons	Hours per week	
Reason for Leaving?		
DUTIES (must be listed):		
Official Job Name/Title		Company Name
Name/Title of Immediate Supervisor		_ Dept. Where Assigned
Business Address/Phone #		
Employed From $\frac{/}{Mon / Yr} \frac{To}{Mon} \frac{/}{Yr} \frac{Total}{Yr} \frac{/}{Mons}$	Hours per week	
Reason for Leaving?		
DUTIES (must be listed):		

# **EMPLOYMENT HISTORY (Continued)**

Official Job Name/Title	Company Name
Name/Title of Immediate Supervisor	Dept. Where Assigned
Business Address/Phone #	
Employed From/ To/ Total/ Mon / Yr Mon / Yr Yrs / Mons Reason for Leaving? DUTIES (must be listed):	Hours per week
Official Job Name/Title	Company Name
Name/Title of Immediate Supervisor	Dept. Where Assigned
	Dept. Where Assigned

# Supplemental Employment Information

#### **EDUCATION**

Type of School	Name and Location	# of Years Attended	Did you Graduate?	Type of Degree	List Major
High School or G.E.D.					
College or University					
Other Education					

If you have any additional education or experience, or have taken SPECIAL COURSES or have a REQUIRED SPECIAL LICENSE (e.g., CDL, Nurse, Plumbing or Electrical, Etc.), list these below. Please include: Where acquired and the total number of hours involved

Has any license or certification you have held been surrendered, suspended or revoked for any reason? If so, please explain:

# DISMISSAL

Yes No

Has your employment ever been terminated for reasons related to poor performance, misconduct, violation of a work rule, inefficiency, insubordination, attendance or tardiness or have you ever resigned in lieu of termination of your employment?

If, "Yes", below please provide a detailed explanation.

Have you ever applied for and been denied unemployment comp	pensation ber	nefits? 🗌 Yes	🗌 No	If "Yes", please explain:
Have you ever served in any branch of the United States Military	? Yes	No Dates	of service:	to
*Do you claim Veteran's Preference (5 points)? Yes *Do you claim Disabled Veteran's Preference (10 points)?	No Yes	No		

\* Form DD214 and/or VA Disability Rating Letter must be submitted as proof of service and/or disability; no other proof is acceptable. It must be submitted with the application. (See General Conditions on back of examination announcement for additional information)

# CITY OF WATERBURY CIVIL SERVICE COMMISSION REQUEST FOR RESIDENCY CONSIDERATION

# Are you requesting residency points? Yes

s No

## IF YES SELECTED ABOVE: THIS SECTION MUST BE COMPLETED BY CITY OF WATERBURY <u>RESIDENTS IN ORDER TO BE ELIGIBLE FOR RESIDENCY POINTS.</u>

In order to qualify for residency consideration in accordance with City of Waterbury Charter and the Civil Service Rules and Regulations, the Civil Service Office requires that candidates provide irrefutable evidence to substantiate that, at the date of application (no later than the closing date for applications) and at the date of certification for hire you are domiciled in the City of Waterbury.

As the intention of the Charter amendment is to give those domiciled in the City of Waterbury consideration in hiring, the Director of Human Resources is directed to notify all applicants that the application of residency consideration is a privilege subject to being withdrawn if the applicant loses domiciliary status at any time after the filing of this application, as well as any time during the existence of any eligibility list up to and including the date of certification into the civil service position.

For purposes of this request, "DOMICILED" is defined to be, "that place where an individual has his true, fixed and permanent home and to which whenever he is absent he has the intention of returning."

You are required to complete this section at the time of application in any event not later than the closing date for applications. You must also be prepared to submit any additional documentation that documents proof of domicile as the Director of Human Resources may require. This information will be subject to verification by the Civil Service Office or any other agency or department designated by the Civil Service Commission.

# IMPORTANT NOTICE: THE APPLICANT MUST PROVIDE DOCUMENTATION TO ESTABLISH PROOF OF LEGAL DOMICILE. ANY FALSE OR MISLEADING STATEMENTS WILL RESULT IN <u>IMMEDIATE DISQUALIFICATION OR</u> <u>DISMISSAL</u>. A DECISION TO DISQUALIFY SHALL BE FINAL.

Examples of Documents that can be utilized to show proof of legal domicile in Waterbury are (but not limited to):

## EXAMPLE: Only one (1) is required.

- Copy of Utility Bills (i.e., phone, electric, cable)
- Copy of Tax Bills
- Copy of Insurance Bills

Position Applying For:

hereby attest that I am a bona fide resident of the City of Waterbury

**PLEASE PRINT:** I, \_\_\_\_\_\_\_\_ hereby attest that I am a bona fide resident of the City of Waterbury who, as of the closing date for applications for the examination/position above is domiciled within the City. Evidence to substantiate my claim for residency consideration is provided as follows:

## CHECK ALL STATEMENTS WHICH APPLY:

(1.) I \_\_\_\_\_ own \_\_\_\_\_ rent property in the City of Waterbury at: \_\_\_\_\_\_

I have been domiciled in the City since:

Date

If renting property, please provide the following:

Name of Landlord

(2.) My driver's license indicates a Waterbury address:

Operator Number

Telephone #

Examination Number:

(Street Address and Zip Code)

Expires

## **REQUEST FOR RESIDENCY POINTS (Continued)**

(3.) I own a motor vehicle registered in the City of Waterbury:

. (Make and Model of Vehicle)	License Number	
(4.) I am a registered voter in the City of Waterbury. Yes No		
(5.) I do not own or rent property outside of the Waterbury. True False		
If you do own or rent property outside of Waterbury, please explain:		

I hereby certify that I acknowledge that this Request is an addendum to the Application and that ALL statements made by me on this application are true, complete and correct. I understand and agree that if I make any false or misleading statements of fact that I am subject to immediate disqualification, rescinding of certification, removal from the eligibility list, or dismissal, and to such other penalties prescribed by law of Civil Service Rules or Charter. I also understand that this application for residency consideration is a privilege subject to being withdrawn if I lose domiciliary status at any time after the submission of the employment application.

Signature:

Date: \_\_\_\_\_

## NOTICE TO APPLICANTS REGARDING PRE-EMPLOYMENT DRUG TESTING

Any individual applying for employment with the City of Waterbury or the Waterbury Board of Education (hereafter collectively "WATERBURY") may be required to submit to a urinalysis drug test as a mandatory part of the employment application process.

This notice serves as a written statement of WATERBURY's intention to conduct drug 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 WATERBURY and shall only be disclosed to such persons for whom such disclosure is necessary. Positive test results, or a refusal to sign this consent form and participate in pre-employment drug testing, shall be grounds for denial of employment. Arrangements for testing will be made by a representative of WATERBURY, in consultation with each applicant. Cooperation in scheduling the testing is important for processing an application.

Further, WATERBURY prohibits employees from possessing or being under the influence of alcohol or illegal drugs while performing work-related functions. Failure to consent to a properly requested test for drugs or alcohol during the course of employment or failing a drug or alcohol test are grounds for termination of employment.

By signing below, you consent to be drug 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 WATERBURY, you will comply in full with WATERBURY's drug and alcohol policies.

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

Date: \_\_\_\_\_

Printed Name:

### NOTICE OF BACKGROUND CHECK AND FAIR CREDIT REPORTING ACT DISCLOSURE

As part of the interview process, the City of Waterbury or the Waterbury Board of Education (hereafter collectively "WATERBURY") and its representatives and/or agents, including the Waterbury Civil Service Commission, may conduct a background check. If you are hired, WATERBURY may also conduct a background check in deciding whether to continue your employment and when making other employment-related decisions directly affecting you. As part of any background check, WATERBURY may obtain a "consumer report" from a "consumer reporting agency." These terms are defined in the Fair Credit Reporting Act ("FCRA"), which applies to you. A consumer report may include information regarding such issues as your criminal record, motor vehicle record, character and reputation or other public record information on file in local, state or federal agencies. These reports may contain information regarding your use of social media, and other publicly accessible information. Social media includes, but is not limited to, social networking websites (e.g., Facebook), professional networking websites (e.g., LinkedIn), blogs, and other online media.

WATERBURY may only obtain and/or use a credit report pertaining to any Connecticut applicants/employees: (a) when the report is required by law; or (b) when WATERBURY reasonably believes the employee engaged in any activity that constitutes a violation of the law related to his/her employment; or (c) when the report is substantially related to the applicant/employee's current or potential job or when WATERBURY has a bona fide purpose for requesting or using the information in the credit report that is substantially jobrelated and is disclosed in writing to the applicant/employee.

If WATERBURY obtains a "consumer report" about you, and considers any information in the "consumer report" when making an employment-related decision that directly and adversely affects you, you will be provided with a copy of the report before the decision is finalized and other information required by the FCRA (including a summary of your rights under the FCRA and the name, address and telephone number of the consumer reporting agency and other applicable federal agencies). Deferrals will be emailed to you.

## **APPLICANT'S CERTIFICATION AND SIGNATURE**

I certify that the statements made by me on this application are true and complete to the best of my knowledge and are made in good faith. I understand that if I supply any false or misleading information on my job application, resume, or during my job interview, including by omitting pertinent information, I am subject to disqualification and dismissal and to such other penalties as may be prescribed by law or personnel regulations, whenever such false or misleading information may be discovered. All statements made on this application, including employment information, are subject to verification as a condition of employment. I voluntarily give the Civil Service Commission of the City of Waterbury, Connecticut, or its duly authorized representative the right to make a thorough investigation of my past employment and activities, agree to cooperate in such investigation, and release from all liability or responsibility all persons, companies, or corporations supplying such information.

I attest that the above information is true; I understand that if I am offered a position: (a) I will be responsible for the requirements and terms of the job description, (b) I will be required to attend training and orientation as needed for the position (c) an offer of a position may be contingent upon my completing and verifying required certifications at least two weeks before the position starts, and upon successfully completing other requirements.

Signature Date

(Application can't be considered valid without applicant's written or digital signature)

The City of Waterbury and the Waterbury Board of Education (hereafter "WATERBURY") are equal opportunity employers, dedicated to a policy of nondiscrimination in employment on any basis prohibited by law. WATERBURY considers applicants for all positions without regard to race, color, religion, gender, national origin/ancestry, age, disability, marital or civil union party status, sexual orientation, gender identity/expression, genetic information, or any other legally protected status. WATERBURY is committed to providing equal opportunity in compliance with all applicable laws. EEOP Utilization Report is available upon request.

## APPLICANT DATA

Position Applying for\_

EXAM#

**Disclosure of Sex/Race/Ethnicity is Voluntary.** In order to meet State and Federal reporting requirements, we are requesting that you voluntarily supply the following information. Disclosure is not mandatory. This data will not be considered in the evaluation of your application and is requested for reporting purposes only.

A. SEX: Female Male

B. RACE/ETHNIC DATA:

Hispanic or Latino - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

White (Not Hispanic or Latino) - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Black or African American (Not Hispanic or Latino) - A person having origins in any of the black racial groups of Africa.

**Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)** - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Asian (Not Hispanic or Latino) - A person having origins in any of the original peoples of the Far East,

Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea,

Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

American Indian or Alaska Native (Not Hispanic or Latino) - A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

**Two or More Races (Not Hispanic or Latino) -** All persons who identify with more than one of the above five races.

NOTE: This Form performs best when downloaded to a device and is completed using the latest Adobe Reader Software. The form will not function properly when completed from within a browser like MS Edge or Google Chrome. *ALL REQUIRED FIELDS WILL PROMPT FOR DATA BEFORE BUTTONS BELOW WORK*.