

**THE TOWN OF TOLLAND**  
**APPLICATION FOR EMPLOYMENT PART 1 (PRE-INTERVIEW)**

The Town of Tolland (the "Town") is an equal opportunity employer, dedicated to a policy of nondiscrimination in employment on any basis prohibited by law. The Town considers applicants for all positions without regard to race, color, religion, gender, national origin/ancestry, age, disability, marital status, military/veteran status, sexual orientation, gender identity/expression, genetic information or any other legally protected status. The Town will provide equal opportunity in compliance with all applicable laws.

**PERSONAL AND POSITION INFORMATION**

<b>Last Name</b>	<b>First Name</b>	<b>Middle</b>
<b>Address</b>	<b>Number</b>	<b>Street</b>
	<b>City</b>	<b>State</b>
		<b>Zip Code</b>
<b>Telephone Number(s):</b>	<b>Home</b>	<b>Work</b>
		<b>Mobile</b>
<b>Email Address:</b>		

Position(s) applied for: \_\_\_\_\_ Hourly Rate/Salary desired? \_\_\_\_\_

On what date would you be available to work? \_\_\_\_\_ Are you available to work:  Full-time  Part-time

Are there any hours or days that you cannot or will not work? \_\_\_\_\_

Are you at least 18 years old?  Yes  No

If employment is offered, can you produce documentation required by law to establish work authorization and identity?  Yes  No

Are you currently on "lay-off" status and subject to recall?  Yes  No

Can you work overtime if your job requires it?  Yes  No

Can you travel if your job requires it?  Yes  No

Do you have reliable transportation to and from work?  Yes  No

If your job requires you to use a personal vehicle, would you have one to use?  Yes  No

Can you provide a valid driver's license and proof of insurance if required to drive?  Yes  No

Have you ever applied to or work at the Town before?  Yes  No

If yes, list dates of employment, location/department/position and (if applicable) former name

Do you have any friends or relatives working at the Town?

Yes  No

If yes, list name and relationship to you:

\_\_\_\_\_  
\_\_\_\_\_

**EDUCATION AND TRAINING**

Have you graduated from High School or received a High School equivalency diploma?  Yes  No

If no, circle the highest grade completed: 9 10 11 / High School Name: \_\_\_\_\_

School	Name and Address of School	Course of Study	Years Completed	Diploma/Degree
Technical/ Trade or Business				
College or University				
Graduate or Professional				

Academic Scholarships/Awards \_\_\_\_\_

Describe any licenses or certifications (type, which state(s), date(s), license number(s)) \_\_\_\_\_

Has any license or certification you have held been surrendered, suspended or revoked for any reason? \_\_\_\_\_

If so, please explain: \_\_\_\_\_

Military Service (Dates, Branch, Characterization of Discharge) \_\_\_\_\_

List any skills or knowledge relevant to the job for which you are applying that you think may be helpful to us in considering your application:

\_\_\_\_\_  
\_\_\_\_\_

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**EMPLOYMENT EXPERIENCE**

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Have you ever been dismissed, involuntarily terminated or terminated by mutual agreement?  Yes  No

Have you ever been asked/forced to resign or given choice to resign rather than termination?  Yes  No

If yes to either question, please explain (continue on back if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Starting with your *most recent employment*, provide your **complete** employment history for the past 10 years. Include any job-related military service assignments and volunteer activities. You must complete this section even if you provide a resume. Please be aware that your current and previous employers may be contacted.

Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number(s) \_\_\_\_\_ Job Title \_\_\_\_\_

Duties & Accomplishments \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Supervisor (Name and Title) \_\_\_\_\_

Reason for leaving \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number(s) \_\_\_\_\_ Job Title \_\_\_\_\_

Duties & Accomplishments \_\_\_\_\_

\_\_\_\_\_

Supervisor (Name and Title) \_\_\_\_\_

Reason for leaving \_\_\_\_\_

=====  
Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number(s) \_\_\_\_\_ Job Title \_\_\_\_\_

Duties & Accomplishments \_\_\_\_\_

\_\_\_\_\_

Supervisor (Name and Title) \_\_\_\_\_

Reason for leaving \_\_\_\_\_

=====  
(If you need additional space, please continue on back of application or attach additional sheets.)

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**PROFESSIONAL REFERENCES FOR EMPLOYMENT**  
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Please provide names of 3 professional references, not related to you, whom you have known at least one year.

NAME                      TITLE/ADDRESS                      HOME/CELL PHONE                      BUSINESS PHONE

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

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**NOTICE TO APPLICANTS REGARDING PRE-EMPLOYMENT DRUG AND/OR ALCOHOL TESTING**

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Any individual applying for employment with the Town of Tolland (“The Town”) may be required to submit to a urinalysis drug test or alcohol testing as a mandatory part of the employment application process. This notice serves as a written statement of the Town’s intention to conduct drug and/or alcohol 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 the Town and shall not be disclosed to the employees of the Town, or any other person, other than to those persons for whom such disclosure is necessary or as otherwise required by law. Positive test results, or a refusal to sign this consent form and participate in pre-employment drug and/or alcohol testing, shall be grounds for denial of employment. Arrangements for testing will be made by a representative of the Town, in consultation with each applicant. Cooperation in scheduling the testing is important for processing an application.

By signing below, you consent to be drug and/or alcohol 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 the Town, you will comply in full with the Town’s drug and alcohol policies.

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

Printed Name: \_\_\_\_\_

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**AT-WILL EMPLOYMENT DISCLAIMER AND APPLICANT’S AGREEMENT AND CERTIFICATION**

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I certify that the answers given in this application are true to the best of my knowledge, I understand that the use of this application form does not indicate that there are any positions open and does not in any way obligate the Town of Tolland (hereafter “the Town”) to employ me.

*In the event I become employed and in consideration of my employment, I agree to conform to the policies and procedures of the Town, as they may from time to time be implemented or revised, and that unless I am covered by an applicable collective bargaining agreement or individual written contract, my employment and compensation are “at-will” and that my employment can be terminated with or without cause at any time for any lawful reason at the option of either the Town or myself.* I understand that should I be granted an interview, no representations that may be made at the interview are to be construed as creating any obligation, promise or contract on behalf of the Town that in any way would limit the Town’s right to terminate my employment at will. I understand that no supervisory, management or any other employee at the Town has any authority to make a commitment of guaranteed or continuing employment to me, and no document or publication of the Town or conduct of anyone at the Town should be interpreted to make such a guarantee.

I understand that false or misleading information given in my application, resume, interview or during the course of my employment may result in withdrawal of a job offer or discipline up to and including termination of employment, whenever the omission or falsehood is discovered. I understand that acceptance for employment shall depend on satisfactory replies from my references and any other required background checks or pre-employment tests. I understand that if I am paid a weekly salary rather than an hourly rate, my salary is intended to compensate me for all hours I work, including any hours in excess of 40 hours in a work week.

**I have read, understood and agree to the foregoing.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

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**VOLUNTARY EQUAL EMPLOYMENT OPPORTUNITY INFORMATION**

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Government agencies require periodic reports on the gender and race/ethnicity status of applicants. This data is for analysis in preparing government reports and for affirmative action purposes only. It is confidential and will be kept separate from your application. Those making the hiring decision will not use it.

**You are not required to provide this information, but your cooperation in completing this form is appreciated.**

**POSITION APPLIED FOR:** \_\_\_\_\_

**GENDER:**                      Male \_\_\_\_\_                      Female \_\_\_\_\_

**RACE/ETHNIC GROUP** (see definitions below) (CHECK ONE):

White \_\_\_\_\_      Black or African American \_\_\_\_\_      Asian \_\_\_\_\_      American Indian or Alaska Native \_\_\_\_\_

Native Hawaiian or Other Pacific Islander \_\_\_\_\_      Hispanic or Latino \_\_\_\_\_      Two or More Races \_\_\_\_\_

**DEFINITIONS:**

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

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

**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.

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

**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.

**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.