

Kent Sewer Treatment Plant

125 Schaghticoke Road

P.O. Box 144

Kent, CT 06757

EMPLOYMENT APPLICATION

An Equal Opportunity Employer

Applying For:

Name or type of position: _____

Type of employment desired: ☐ Full Time ☐ Part Time ☐ Seasonal

Have you previously filed an application with the Town of Kent? ☐ Yes ☐ No

If yes, please list position and date: _____

Personal Information:

Last Name: _____ First Name: _____ Middle Int: _____

Other name(s) under which you have been employed or attended school: _____

Mailing Address (P.O. Boxes are not acceptable)

Street: _____ City: _____

State: _____ Zip: _____

How long at this address: _____

List any previous address if at current address less than five years: _____

Home Phone: _____ Work phone: _____ Cell Phone: _____

Preferred #: ☐ Home Phone ☐ Work Phone ☐ Cell Phone

Driver's License Number: _____ State: _____

Type (Class) _____ CDL: ☐ Yes ☐ No

Education

High School: _____

Graduated: ☐ Yes ☐ No

College: _____

Last Year Completed: _____ Graduated: ☐ Yes ☐ No

Subjects Studied and Degree Received: _____

Trade, Business or Correspondence School: _____

Last Year Completed: _____ Graduated: ☐ Yes ☐ No

Subject Studied & Degree(s) Received: _____

Former Employers (List below your last four employers, starting with the most recent.):

Hire Date: _____ Termination Date: _____
Name & Address of Employer: _____

Salary (upon leaving): _____ Position: _____
Reason for Leaving: _____

Hire Date: _____ Termination Date: _____
Name & Address of Employer: _____

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Name & Address of Employer: _____

Salary (upon leaving): _____ Position: _____
Reason for Leaving: _____

Hire Date: _____ Termination Date: _____
Name & Address of Employer: _____

Salary (upon leaving): _____ Position: _____
Reason for Leaving: _____

References (List 3 persons not related to you, whom you have known at least one year):

Name: _____ Relationship: _____
Address: _____
Phone number: _____ Years acquainted: _____

Name: _____ Relationship: _____
Address: _____
Phone number: _____ Years acquainted: _____

Name: _____ Relationship: _____
Address: _____
Phone number: _____ Years acquainted: _____

PRE-EMPLOYMENT STATEMENT (Please read carefully):

I certify that all statements made on or in connection with this application are true, complete, and correct to the best of my knowledge. I understand that incomplete, false, inaccurate, or misleading information given on my application, during my interview(s) or during the course of my employment may result in the rejection of this application; withdrawal of a job offer; or discipline, up to and including termination of employment. Further, false information provided, whether willingly or accidental, may result in my immediate dismissal of employment, whenever the omission is discovered.

I authorize you to make such investigations and inquiries of my personal, employment, medical history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools or persons from liability in responding to inquiries in connection with my application.

I understand that I am required to abide by all rules and regulations of the Kent Sewer Treatment Plant.

I have read, understand and agree to the foregoing.

Signature of Applicant: _____

Date: _____