

Start Date:	End Date:	Name and Address of Employer:	
Starting Salary:	Ending Salary:	Hours Per Week:	Title, Name, & Phone No. of Immediate Supervisor:
Reason for Leaving:			
Description of Duties and Responsibilities:			
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EMPLOYEE CERTIFICATIONS AND AGREEMENTS

I understand that my offer of employment may be conditioned on a pre-employment physical and drug test. If I test positively on a properly confirmed drug test for controlled substances or refusal to submit to a drug test it is grounds for the withdrawal of any offer of employment and if a positive properly confirmed pre-employment drug test is reported after I have begun employment, it may be grounds for termination of any employment.

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 such information.

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 collective 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. Unless your position is governed by a collective bargaining agreement, statute or other contract, 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, the undersigned have read, understand and agree to the foregoing.

Signature of Applicant (Required)

Date

Note: A typed name will substitute for a handwritten signature.

SUPPLEMENT TO EMPLOYMENT APPLICATION PARAGRAPH 19

You are not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to section 46b-146, 54-76o or 54-142a. Criminal records subject to erasure pursuant to section 46b-146, 54-76o or 54-142a are records pertaining to a finding of delinquency or that a child was a member of a family with service needs, an adjudication as a youthful offender, a criminal charge that has been dismissed or nolle, a criminal charge for which the person has been found not guilty or a conviction for which the person received an absolute pardon. Any person whose criminal records have been erased pursuant to section 46b-146, 54-76o or 54-142a shall be deemed to have never been arrested within the meaning of the general statutes with respect to the proceedings so erased and may so swear under oath.

1. Please state the nature of the crime in which you were convicted:

Date of conviction:

Sentence or penalty imposed:

Please provide any details surrounding your conviction or rehabilitation that you think the town should consider when reviewing your application:

2. Please state the nature of crime in which you were convicted:

Date of conviction:

Sentence or penalty imposed:

Please provide any details surrounding your conviction or evidence of rehabilitation that you think the Town should consider when reviewing your application:

The information I have provided regarding any prior convictions on this form is accurate and complete. I understand that providing this information will not disqualify me from consideration for a position but that the nature of the crime, the relevance of the crime to the position applied for, evidence of rehabilitation and the length of time since the crime occurred will be considered. I also understand that failure to provide accurate or complete information will result in the withdrawal of a job offer or termination of my employment.

Signature (Required)

Date

Note: A typed name will substitute for a handwritten signature.