

THE STERLING RECREATION AUTHORITY

Is currently
Accepting Applications for Program
Counselors for its
Summer Recreation Program.
Applications will be in the Main Office
Monday thru Thursday 8:00 am to 4:00pm

or on Saturdays from 9:00 to 11:30 in the Recreation Office. If you would like more information please contact the recreation office at 860-564-2136 or email at recdir@sterlingct.us. The last day applications will be accepted is May 31, 2017.

This program will start July 5 thru August 4th, from 8:30 to 3:30 Monday - Friday

Application for Employment - Town of Sterling

Please Print			
Position Applied for:		Date:	
Name:			
Address:			
Telephone #	Cellular/other#	E-mail	
How Did You Learn About Advertisement Emplo	Us? yment AgencyFriend Rela	tive Walk-In Other	
Type of Employment Desire	ed: Full-Time Par	t Time Temporary	Seasonal
Conviction will not necessarily disqu If Yes, please explain:	ity" or "no contest" to, or been coalify an applicant from employment.		
	<u>S</u> ifications, skills, special training which you are applying:		
Computer Skills (includ	e software titles and years o	f experience):	
	•	•	Years:
			Years:
			Years:
Other			Years:
School (include City & Stat	ent school attended, provide the	ed Diploma/degre	
3.			
References List names and telephone management.	umbers of three business/work/so	chool references who are not rela	ated to you.

Employment History

Starting with your most recent employer, provide the following employment, information (past 10 years). Use additional sheets of plain paper if you need more space.

Employer		Length of Service		Work Performed
Address				
Telephone Number	Telephone Number(s)		Hourly Rate/Salary	
		Starting	Final	
lob Title	Supervisor			
Reason for Leaving]			
Employer		Length of	Service	Work Performed
Address				
Telephone Number	elephone Number(s)		Hourly Rate/Salary	
·		Starting	Final	
lob Title	Supervisor			
Reason for Leaving	}			
Employer		Length of	Service	Work Performed
Address			1	
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving	3			

I authorize, without reservation, the employer to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities, and educational institutions and to verify the accuracy of all information provided by me in this application, resume, and/or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations, or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form.

This Municipality does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status. This Municipality takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to eliminate me from further consideration for employment or may result in my immediate discharge from the employer's service, whenever it is discovered.

Signature of Applicant:		Date:	
<i>Q</i> 11			