



CITY OF BRIDGEPORT, CONNECTICUT
CIVIL SERVICE COMMISSION

CITY HALL • 45 LYON TERRACE • BRIDGEPORT, CONNECTICUT 06604

School Crossing Guard Employment Application

Position Applied for		Date	
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APPLICANT INFORMATION							
Last Name		First Name		M.I.			
Mailing Address				Apartment/Unit #			
City		State		ZIP			
Phone			E-mail Address				
Commercial Drivers License (CDL) (Yes/No)			CT Drivers License (Yes/No)				
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Have you ever worked for the City of Bridgeport before?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?				

EDUCATION							
High School				Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		
College				Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		
Other				Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		

REFERENCES			
<i>Please list three professional references.</i>			
Full Name			Relationship
Company			Phone
Address			
Full Name			Relationship
Company			Phone
Address			
Full Name			Relationship
Company			Phone
Address			

PREVIOUS EMPLOYMENT							
Company					Phone		
Address					Supervisor		
Job Title							
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?					YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	

Company					Phone		
Address					Supervisor		
Job Title							
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?					YES <input checked="" type="checkbox"/>	NO <input checked="" type="checkbox"/>	

Company					Phone		
Address					Supervisor		
Job Title							
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?					YES <input type="checkbox"/>	NO <input type="checkbox"/>	

DEMOGRAPHICS				
<p>For purposes of Affirmative Action, we are requesting that you fill out the data below. This data will in no way be used to influence your possible selection for any position. The purpose of collecting this data is statistical and may help this office to determine whether advertising is reaching all segments of the community.</p>				
GENDER:	FEMALE <input type="checkbox"/>	MALE <input type="checkbox"/>	HISPANIC or LATINO	
ETHNICITY:	WHITE <input type="checkbox"/>	ASIAN <input type="checkbox"/>	BLACK or AFRICAN AMERICAN <input type="checkbox"/>	AMERICAN INDIAN or ALASKA NATIVE <input type="checkbox"/>
NATIVE HAWAIIAN or PACIFIC ISLANDER <input type="checkbox"/>		TWO or MORE RACES <input type="checkbox"/>		OTHER <input type="checkbox"/>

IN CASE OF EMERGENCY, PLEASE NOTIFY:				
Name:			Name:	
Relationship:			Relationship:	
Home Phone:			Home Phone:	
Work Phone:			Work Phone:	
Cell Phone:			Cell Phone:	

DISCLAIMER AND SIGNATURE

Signature		Date	
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I certify that all information supplied on this application is accurate and truthful to the best of my knowledge. I understand that any misrepresentation of facts is cause for refusal of employment and/or termination of employment.

I understand that, if I am hired as a seasonal or part-time employee, I am not eligible for any City of Bridgeport sponsored benefits.

In the case of an emailed application, entering your name above will constitute an electronic signature. You may be asked to sign this application in person if you are offered a position with the City of Bridgeport.

It is the policy of the City of Bridgeport to employ, train, compensate, and promote individuals without regard to race, religion, national origin, sex, sexual orientation, age, disability, veteran status, or other characteristics protected by law.