# BRIDGE PORTING CONTROL OF THE PORTING CONTROL

## CITY OF BRIDGEPORT, CONNECTICUT

The **DEPARTMENT OF PUBLIC FACILITIES** is now accepting applications for Seasonal positions for the Spring/Summer 2021 Season

Applicants must be at least 18 years of age to apply.

Applicants will be hired on a seasonal/part-time basis with potential of permanent employment.

<u>TO APPLY:</u> PLEASE FILL OUT THE APPLICATION BELOW AND EMAIL TO <u>COB.Jobs@bridgeportct.gov</u> OR DELIVER TO HUMAN RESOURCES, CITY HALL, 45 LYON TERRACE, ROOM 104 (Resumes accepted if available)

#### PARK DEPARTMENT

SALARY RANGE: \$15/hr. - \$16/hr.

Groundskeeping Crew Landscaping Crew CDL Drivers Restroom Attendant

#### **ROADWAY DEPARTMENT**

SALARY RANGE: \$15/hr. - \$16/hr.

Clerical Landscapers General Laborer CDL Drivers

#### **BUILDING MAINTANENCE**

SALARY RANGE: \$15/hr. - \$16/hr.

General Laborer Janitorial / Custodial Landscaping Crew Groundskeeping Crew

#### DEPARTMENT OF RECREATION

SALARY RANGE: \$12/hr. - \$22/hr.

Lifeguards

**Beach Supervisors** 

Camp Counselors

Campsite Coordinator

Checkpoint Attendants

Splash Pad Attendants

Water Taxi Crew Members & Captain

### FAIRCHIELD WHEELER GOLF COURSE

SALARY RANGE: \$12/hr. - \$15/hr.

Groundkeeper

Jr. Groundskeeper

Starters

Rangers

Cart Barn Attendant

Restroom Attendant

Cashiers

An Equal Opportunity Employer MF/AA/DIS

For further information and contact:
CIVIL SERVICE COMMISSION
45 LYON TERRACE
BRIDGEPORT, CT 06604



# CITY OF BRIDGEPORT, CONNECTICUT CIVIL SERVICE COMMISSION

CITY HALL • 45 LYON TERRACE • BRIDGEPORT, CONNECTICUT 06604

## Non-Competitive/Seasonal Employment Application Please list position(s) you are applying for

Position Ap	plied for												Date					
APPLICA	NT INF	ORM	ATION															
Last Name								First Name								M.I.		
Mailing Address							· ·						Apartı	ment/U	nit #		1	
City							State						ZIP					
Phone					E-mail A	Addre	ess			<u> </u>		I.						
Commercia Drivers Lice (CDL) (Yes	ense						CT Drive License (Yes/No											
Are you a c	citizen of	YES 🗌	NO	O 🗆	If n	o, are	are you authorized to w			rk in t	the U.S.	.? YE	ES 🗌	1	NO 🗆			
Have you e before?	u ever worked for the City of Bridgeport  YES  NO  If so,						o, whe	en?					•					
EDUCATI	ON																	
High School						Ad	ldress											
From		То		Did you graduate	? YES [		NO [			Degree								
College						Ad	ldress											
From		То		Did you graduate? YES			NO 🗆			Degree								
Other						Ad	ldress											
From		То		Did you graduate? YES □			NO 🗆			Degree								
REFEREN	ICES																	
Please list	three pi	rofess	sional ref	erences.														
Full Name									Relat	ionship								
Company									Phon	е								
Address																		
Full Name										ationship								
Company									Phon	Phone								
Address																		
Full Name	Name								Relationship									
Company	mpany								Phone									
Address													_		_			

PREVIOUS EMPLOYMENT													
Company							Phone						
Address							Supervisor						
Job Title													
Responsibiliti	es												
From To Reason for Leaving													
May we cont	act yo	ur previo	us super	visor for a reference	ce?	YES	NO 🗆						
Company Phone													
Address							Supervisor						
Job Title													
Responsibilities													
From	From To Reason for Leaving												
May we contact your previous supervisor for a reference?					ce?	YES	NO I						
Company Phone													
Address							Supervisor						
Job Title													
Responsibiliti	es												
From		То		Reason for Leavi	ng								
May we contact your previous supervisor for a reference? YES \( \sqrt{NO} \sqrt{\sqrt{\sqrt{NO}}} \)													
<b>DEMOGRAPHICS</b> 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.													
GENDER: FEMALE MALE													
ETHNICITY: WHITE ASIAN BLACK or AFRIC					BLAC	K or AFRICA	ICAN AMERICAN AMERICAN INDIAN or ALASKA NATIVE						
NATIVE HAWAIIAN or PACIFIC ISLANDER													
IN CASE O	F EM	1ERGEN	ICY, PL	EASE NOTIFY:									
Name:			,			N	lame:						
Relationship:	elationship: Rel						Relationship:						
Home Phone						lome Phone:							
Work Phone:						/ork Phone:							
Cell Phone:						C	Cell Phone:						

DISCLAIMER AND SIGNATURE										
Signature		Date								

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.