

This is the application for the SCHOOL CROSSING GUARD position only.

Do not use this application to apply for any other positions/examinations

To apply for this position, you must submit:

1. An application, found on the following pages of this document

Print out this form and fill it in, in ink. Do not use pencil. Deliver in person or email this application to:

Civil Service Commission
City Hall, Room 106
45 Lyon Terrace
Bridgeport, CT 06604

Or

Cob.jobs@bridgeportct.gov

Please be sure to answer all questions on this application and follow these instructions carefully.

We will contact you as soon as we have information to share with you about this position.

Position Applied For: _____

Application for Non-Competitive or Seasonal Employment

Last Name

1. Print full name: _____ Home telephone: _____

Email: _____ Cell phone: _____

2. Home Address: _____
Street City State Zip Code

3. Are you a U.S. Citizen or permanent resident or otherwise legally authorized to accept employment with the City of Bridgeport? ____ Yes ____ No

4. Have you worked for the City of Bridgeport before? ____ Yes ____ No

5. Can you perform the duties of the position for which you are applying? ____ Yes ____ No

6. Dates you are available for employment: Start _____ End _____

7. Are there any dates that you will not be available to work? ____ Yes ____ No
If YES, list dates: _____

First Name

8a. Do you hold a valid drivers license? ____ Yes ____ No (Only if position requires driving)
State: _____ Operator Number: _____

8b. Do you hold a Commercial Drivers License? ____ Yes ____ No

9. Education: School Attended Course of Study Did you Graduate?

School Attended	Course of Study	Did you Graduate?

10. Work Record – List all employers – Continued on Page 2

From	To	Employer's Name/Address	Duties	Reason for Leaving

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.

Signature of Applicant

Printed Name

Date

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.

10. Work Record – Continued

From	To	Employer's Name/Address	Duties	Reason for Leaving

10. In case of emergency, please notify:

Name:	Name:
Relationship:	Relationship:
Home Phone:	Home Phone:
Work Phone:	Work Phone:
Cell Phone:	Cell Phone:

COMPLIANCE INFORMATION

The following information is requested for compliance with governmental reporting requirements.
Providing this information is voluntary, and it is not used for interview or hiring decision purposes.

Name: _____

Position applying for: _____

Sex (please check) Male Female

Describe yourself in terms of one of the following groups:

- American Indian / Alaskan Native
- American Indian / Alaskan Native & Black
- American Indian / Alaskan Native & White
- Asian
- Asian & White
- Black (Non-Hispanic)
- Black & White (Non-Hispanic)
- Hispanic
- Native Hawaiian or Other Pacific Islander
- White (Non-Hispanic)
- Two or More Races
- Unknown

Date: _____