



CITY OF MILFORD

OPEN COMPETITIVE EXAM NO. 20-36

DEPUTY TAX COLLECTOR

POSTING DATE: June 12, 2020

CLOSING DATE: July 6, 2020

NOTICE TO ALL APPLICANTS: This opening is available to all City employees and the general public.

SUMMARY OF POSITION: Under the general supervision of the Tax Collector, organizes and performs complex work involved in the collection of property taxes, special assessments and other tax-related revenues; supervises subordinate staff in the daily operations of tax collection, including but not limited to, prioritizing tasks, assisting in problem resolution of any issues taxpayers may have, adjusting personnel work schedules to ensure proper office coverage, and processing payments in accordance with established procedures.

MINIMUM QUALIFICATIONS: Graduation from an accredited college or university with a Bachelor's degree in Business or Public Administration, Accounting, Economics, Legal Studies or a closely related field and two (2) years of experience in accounting, municipal tax collection, debt collection, financial administration or closely related field OR an equivalent combination of training and experience as described above.

SPECIAL REQUIREMENTS: Within five (5) years of appointment, shall obtain the State of Connecticut certification as a Certified Connecticut Municipal Collector (CCMC). Must be eligible for required bonding at time of appointment.

SCOPE OF EXAMINATION: Applications will be reviewed, and those candidates deemed most qualified will be invited to participate in the interview process. Please be advised that the successful candidate will be required to submit to a physical examination, a drug screening and a comprehensive background check prior to appointment.

FILING REQUIREMENTS: Applicants are required to submit a fully complete an **Employment Application, Application Supplement #20-36, resume and cover letter** on or before **July 6, 2020**, to the Human Resources Department, Parsons Office Complex, 70 W. River St., Milford, CT or HRrecruit@milfordct.gov. For forms and detailed application instructions, go to www.ci.milford.ct.us/hr/pages/jobs then select *Deputy Tax Collector*.

SALARY RANGE: The position is a Grade 45 with weekly salary limits as follows:

Minimum	\$866.49*
Step 1.....	\$904.11
Step 2.....	\$941.94
Step 3.....	\$979.54
Step 4.....	\$1,017.40
Maximum.....	\$1,055.06

*Note: New employees are customarily hired at the minimum salary. Collective Bargain Agreement expired on June 30, 2019. Wages subject to any newly negotiated GWI increases.

The City of Milford offers a **generous benefits package** that includes: health insurance, life insurance, defined benefit plan (pension), 457 savings plan, paid time off (vacation, sick, personal business), paid holidays (13 days per year), and Employee Assistance Program.



CITY OF MILFORD

DEPUTY TAX COLLECTOR
APPLICATION SUPPLEMENT #20-36

NAME _____

SOCIAL SECURITY NUMBER 000 - _____ - _____
(Last six digits only)

For this examination, you will be filling out specific information about your education, training and experience. The information that you give will be used to find out how well your background qualifies you for this position. You must fill out this examination booklet completely in order to take part in this examination. **THIS BOOKLET IS AN EXAMINATION.**

On the pages that follow, you will be asked to supply factual information about your education, training, and the duties, responsibilities and accomplishments that are associated with the jobs which helped you qualify for the position for which you are applying. Your education, training, and experience will be scored according to how closely they relate to the various job components or factors of the position of Deputy Tax Collector. Your score will be based only on what you include in this examination. Incomplete or illegible applications/supplements will be rejected.

This examination booklet, a completed Employment Application, a resume and a cover letter must be filed with the Human Resources Department by the last filing date noted in the job announcement, or bear a postmark no later than the last filing date: Information submitted after the last filing date will not be considered.

I. EDUCATION:

A. Do you possess any of the following degrees? (If "Yes", specify the major field of study for which the degree was conferred.)

- 1. High School Diploma Yes _____ No _____
- 2. Associate's Degree Yes _____ Major _____ No _____
- 3. Bachelor's Degree Yes _____ Major _____ No _____
- 4. Master's Degree Yes _____ Major _____ No _____

B. Credits: If you do not have a college degree, but did complete college course work, list the number of credits earned. _____ Major _____

C. Did you complete any post-secondary (technical or business school) education course(s) or training in Public or Business Administration, Accounting, Economics, Legal Studies or a closely related field? If so, please specify courses.

- Yes _____ Course _____ Number of credits earned _____ No _____
- Yes _____ Course _____ Number of credits earned _____ No _____
- Yes _____ Course _____ Number of credits earned _____ No _____

II. EXPERIENCE:

A. Do you have at least two (2) years of professional work experience in accounting, municipal tax collection, debt collection, financial administration or a closely related field?

Yes _____ No. of Years _____ No _____

Please indicate which of the specific areas you have experience with:

- _____ Accounting..... Number of Years _____
- _____ Municipal tax collection..... Number of Years _____
- _____ Debt collection..... Number of Years _____
- _____ Financial administration..... Number of Years _____
- _____ Other: _____ Number of Years _____

III. SPECIALIZED TRAINING

#20-36

List all specialized training (seminars, special courses, advanced training, etc.) that you have attended/completed within the past five (5) years, relevant to public administration, accounting, economics, municipal tax collection, debt collection, financial administration and/or legal studies.

AREA OF STUDY/TITLE OF COURSE	SPONSORING ORGANIZATION	DATES ATTENDED & NO. OF HOURS

On the following pages are a variety of statements which are related to this position. For each of those statements, circle the letter for the level described below which best reflects your experience, education or training as it relates to that item.

- A. - I have applied this Knowledge, Skill or Ability in an actual setting while performing a job.
- B. - I have education or training related to this Knowledge, Skill or Ability, but have not applied it in an actual job.
- C. - I have little or no experience, education or training related to this Knowledge, Skill or Ability.

For each A or B answer, give evidence, in detail, in the space provided of how you acquired this Knowledge, Skill or Ability listed, through education and/or training.

1. Knowledge of the principles of office management, accounting, and business records.

Circle the Appropriate Letter

A B C

Employer/School: _____

Details: _____

2. Ability to maintain complex records and prepare reports from such records. Specify the software used for each.

Circle the Appropriate Letter

A B C

Employer/School: _____

Details: _____

3. Ability to interpret State Statutes, and other rules and regulations.

Circle the Appropriate Letter

A B C

Employer/School: _____

Details: _____

DEPUTY TAX COLLECTOR

GENERAL SUMMARY OF DUTIES

Under the general supervision of the Tax Collector, organizes and performs complex work involved in the collection of property taxes, special assessments and other tax-related revenues; supervises subordinate staff in the daily operations of tax collection, including but not limited to, prioritizing tasks, assisting in problem resolution of any issues taxpayers may have, adjusting personnel work schedules to ensure proper office coverage, and processing payments in accordance with established procedures.

ILLUSTRATIVE DUTIES

Assists the Tax Collector on a variety of administrative matters and supervises a variety of office operations.

Supervises accounting and cashiering personnel in tax and special assessment billing, collection, record-keeping, receipt processing and customer service.

Assists the Tax Collector revenue projections and collections.

Balances accounts.

Reviews activities, answers questions and trains subordinates in the application of new tax laws and procedures. Assigns and supervises work.

Assists in the review and interpretation of current laws, rules and regulations and determines applicability to individual cases.

Prepares and files personal property liens with the Office of the City Clerk; releases liens when appropriate.

Reconciles and mails all new or adjusted bills as corrected by the Assessor's Office; adds or deletes accounts as necessary; processes refunds.

Issues building permits, Health Department clearances, resident access stickers, and boat ramp permits.

Handles a heavy volume of phone calls from internal and external customers.

Responds to daily fax inquiries or requests.

Balances, reconciles and deposits daily tax revenues collected by cashiers.

Transfers monies from accounts with credit balances to other accounts or to new billings for upcoming grand list.

Contacts outside agencies such as banks, government offices for information and verification.

DEPUTY TAX COLLECTOR

ILLUSTRATIVE DUTIES (cont'd.)

Coordinates tax collection activities of the Tax Collector along with coordinated work with the City Assessor, City Attorney's Office, other City and State agencies, and non-governmental entities such as collection agencies.

Reviews and corrects all changes necessary before issuing new bills.

Collects data from City Attorney's Office regarding Court Stipulation accounts to ensure all information is received and correct prior to transferring funds or releasing refunds.

Works with outside vendors on any problems that may arise regarding equipment and/or software programs.

Along with clerical staff, collates and mails out statements for current grand list real estate accounts that were unpaid during collection months.

With assistance of clerical staff, researches motor vehicle back taxes and mails statements.

Edits newly printed rate books from MIS. Assembles and posts Rate Bills/Tax Warrants and Sewer Collection Information into the printed rate books.

Identifies, researches, and processes refunds as necessary.

May prepare periodic reports on delinquent taxes.

Reviews and analyzes historical and statistical reports.

Performs administrative functions such as: designing and ordering forms; assisting with budget preparation; preparing requisitions and monitoring expenditures; receiving, sorting and distributing daily mail; and receiving and processing overnight mail.

Reviews and documents office procedures and recommends changes when appropriate. In the absence of a/the Tax Collector performs the duties of that position.

Performs related work as required.

REQUIRED KNOWLEDGES, SKILLS AND ABILITIES

Considerable knowledge of the principles of office management, accounting, and business records.

Ability to plan, assign, coordinate and supervise the work of assigned staff.

Ability to maintain complex records and prepare reports from such reports.

DEPUTY TAX COLLECTOR

ILLUSTRATIVE DUTIES (cont'd.)

Ability to effect complex procedures and operations from general instructions.

Ability to establish and maintain satisfactory work relationships with other employees and the general public.

Ability to operate standard office machines.

Ability to comprehend and analyze computerized information.

Working knowledge of computer operations.

Working knowledge of regulations governing City operations; ability to interpret State Statutes, and tax rules and regulations as they apply to the functions of Tax Collector.

Ability to prepare statistical and written reports.

MINIMUM TRAINING AND EXPERIENCE REQUIRED

Graduation from an accredited college or university with a Bachelor's degree in Business or Public Administration, Accounting, Economics, Legal Studies or a closely related field and two (2) years of experience in accounting, municipal tax collection, debt collection, financial administration or closely related field OR an equivalent combination of training and experience as described above.

SPECIAL REQUIREMENTS

Within five (5) years of appointment, shall obtain the State of Connecticut certification as a Certified Connecticut Municipal Collector (CCMC). Must be eligible for required bonding at time of appointment.

City of Milford, Conn.
Civil Service Commission 6/86
Re-typed: 4-2006
Revised: 10/2015



CITY OF MILFORD

Human Resources Department
70 W. River Street
Milford, CT 06460
(203) 783-3239
HRrecruit@ci.milford.ct.us

APPLICATION FOR EMPLOYMENT & EXAMINATION **INSTRUCTIONS FOR COMPLETION:**

THIS APPLICATION FORM CONSTITUTES A PART OF THE EXAMINATION PROCESS. Every section must be completed in full, even if resume or other supporting documents are attached. You should not direct this Office to refer to a resume for information that is being asked on the application form. **You must answer all questions completely and accurately in order for your application to be given the proper consideration.**

INCOMPLETE APPLICATION WILL BE REJECTED.

- **LATE APPLICATION WILL NOT BE ACCEPTED.** Application must be received in the Human Resources Department by the application deadline, as stated on the job announcement. You must complete an application form in ink or typed print. You can complete an application form on-line at the City's website and print the application. **You must sign your application in ink or with digital signature.** Application closing dates are noted on each job announcement.
- **ALL APPLICANTS SHOULD READ THE JOB ANNOUNCEMENT OF THE JOB FOR WHICH YOU ARE APPLYING.** Specific job requirements will be noted under the section titled "Minimum Qualification Requirements".
- **EACH SECTION IN THE APPLICATION FORM MUST BE COMPLETED.** You can use additional sheets of papers to attach to your application if you need more space to provide complete information, especially as it pertains to your employment history. **Applications submitted without completing each section will be rejected.**
- **LICENSES AND CERTIFICATIONS** required for the position you are applying for **must be listed and you must provide a copy of any and all licenses and certifications required, as stated on the job announcement.** **Any applications submitted without providing a copy of the required licenses/certifications will be rejected.**
- **YOU MUST ATTACH A CLEAR COPY OF YOUR DRIVER'S LICENSE TO THE APPLICATION FORM, if the job for which you are applying requires a driver's license.** If you fail to provide a copy of your driver license **your application will be rejected.**
- **EMPLOYMENT HISTORY:** You must complete each section, as requested. You must complete "Describe Work Performed" completely. Do not write "see resume" in lieu of completing this information on the application form. **Application submitted without completing each line of this section will be rejected.**
- **VOLUNTARY COMPLIANCE INFORMATION:** Completing the page title "Invitation of Self-Identity" is Voluntary. This information is needed to meet Federal and State reporting requirements and is also used to evaluate the effectiveness of our recruiting and testing procedures. This sheet is not seen by anyone making the hiring decision. **Applications will not be rejected if you choose not to complete this Voluntary Information section.**



APPLICATION FOR EMPLOYMENT

DO NOT WRITE IN THIS SPACE

- Q Rev. by: _____
- NO _____
- Educ _____
- Exp _____
- Not City EE _____
- Other _____

Human Resources Department
 City of Milford
 70 West River Street
 Milford, CT 06460
 (203) 783-3239

 Position applying for
 (use title on job announcement)

PLEASE TYPE OR PRINT CLEARLY IN BLACK INK.
 All blanks must be completed in order for application to be considered.

An Equal Opportunity Employer

PERSONAL INFORMATION

_____ 000- -
 Last Name First Name M.I. Other names by which you have been known Last 6 digits of Soc. Sec. No.

Present Address: _____ How long at this address? _____
 No. and Street City State Zip Code Years/Months

Mailing address (if different from residence address) _____
 No. and Street City State Zip Code

Home Telephone _____ Cellular _____ Email _____

In case of emergency, notify:
 Name _____ Relationship _____ Telephone Number _____

Are you legally eligible for employment in the USA? Yes No *If hired, you will be required to submit proof of eligibility to work in the USA.*

Are you 18 years of age or older? Yes No

Have you previously applied for employment with the City of Milford? If yes, when and for which position(s)? Yes No
 Year(s) applied _____ Position(s) applied for _____

Have you previously been employed by the City of Milford? Yes No If yes, complete the following information:
 Job Title/Department _____ From _____ To _____

List any relatives or members of your household who are employed by the City of Milford:
 Name(s) _____ Job Title _____ Department _____

Do you claim 5 points preference based on active duty in the U.S. Armed Forces? Yes No *Attach copy of DD214.*

Do you claim 10 points veteran's disability preference? Yes No *Attach copy of DD214 & other supporting documentation.*

GENERAL INFORMATION

What date are you available to begin work? _____

Do you have any commitments to another employer that might affect your employment with the City of Milford? Yes No
 If yes, specify commitment(s): _____

Note to Applicant: DO NOT ANSWER THE FOLLOWING QUESTION UNTIL YOU HAVE READ A COPY OF THE JOB DESCRIPTION EXPLAINING THE ESSENTIAL DUTIES OF THE POSITION FOR WHICH YOU ARE APPLYING.

Is there anything that would prevent you from performing the essential functions of the position for which you have applied?
 Yes No

PERSONAL INFORMATION

High school attended:

Name of School(s)	City/State	Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>	
		Yes <input type="checkbox"/> No <input type="checkbox"/>	
		Yes <input type="checkbox"/> No <input type="checkbox"/>	

Colleges/Universities attended:

Name of Educational Institution	City/State	Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>	Dates attended	Degree, diploma, GED, certification or number of credits completed.
		Yes <input type="checkbox"/> No <input type="checkbox"/>		
		Yes <input type="checkbox"/> No <input type="checkbox"/>		
		Yes <input type="checkbox"/> No <input type="checkbox"/>		

EMPLOYMENT HISTORY

List below **ALL** present and past employment. **BEGIN WITH YOUR MOST RECENT EMPLOYMENT AND WORK BACKWARDS CONSECUTIVELY.** Applicants may be required to furnish satisfactory proof of employment history claimed. Use additional pages if necessary. Resumes may be required for certain positions. If applicable, include resume with **completed application.**

Have you ever been discharged or asked to resign? Yes No
 If yes, please explain: _____

Employer _____	FROM		TO		TOTAL TIME	
Address _____	Month	Year	Month	Year	YEARS	MONTHS
Telephone Number _____						
Your job title _____	Hours per week # _____					
Supervisor's Name _____ Title: _____						
Reason for leaving position _____						
Describe Work Performed: _____						
Number of Employees Supervised (if applicable) _____						

Employer _____	FROM		TO		TOTAL TIME	
Address _____	Month	Year	Month	Year	YEARS	MONTHS
Telephone Number _____						
Your job title _____	Hours per week # _____					
Supervisor's Name _____ Title: _____						
Reason for leaving position _____						
Describe Work Performed: _____						
Number of Employees Supervised (if applicable) _____						

Employer _____	FROM		TO		TOTAL TIME	
Address _____	Month	Year	Month	Year	YEARS	MONTHS
Telephone Number _____						
Your job title _____	Hours per week # _____					
Supervisor's Name _____ Title: _____						
Reason for leaving position _____						
Describe Work Performed: _____						
Number of Employees Supervised (if applicable) _____						

EMPLOYMENT HISTORY (continued)

Employer _____	FROM		TO		TOTAL TIME	
Address _____	Month	Year	Month	Year	YEARS	MONTHS
Telephone Number _____						
Your job title _____	Hours per week: # _____					
Supervisor's Name _____ Title: _____						
Reason for leaving position _____						
Describe Work Performed: _____						
Number of Employees Supervised (if applicable) _____						

Employer _____	FROM		TO		TOTAL TIME	
Address _____	Month	Year	Month	Year	YEARS	MONTHS
Telephone Number _____						
Your job title _____	Hours per week # _____					
Supervisor's Name _____ Title: _____						
Reason for leaving position _____						
Describe Work Performed: _____						
Number of Employees Supervised (if applicable) _____						

*****ONLY COMPLETE THE SECTIONS BELOW IF THEY ARE RELEVANT TO THE POSITION YOU HAVE APPLIED*****

SPECIAL SKILLS/TRAINING

Typing speed: _____ words per minute

Business machines (other than computers) you are able to operate: _____

What computer experience do you have? Apple PC

Your skill level in Word can best be described as:

Your skill level in Excel can best be described as:

Your skill level in Outlook can best be described as:

Your skill level in PowerPoint can best be described as:

Your skill level in Access can best be described as:

Your skill level in Acrobat can best be described as:

Your skill level in Publisher can best be described as:

Describe any other software and level of skill or any other applicable abilities:

SPECIAL SKILLS - FIELD

Light Equipment:

What best describes your skill level operating a payloader?

What best describes your skill level operating a backhoe?

What best describes your skill level operating a small tractor?

Heavy Equipment:

What best describes your skill level operating a grader?

What best describes your skill level operating a Cat 225 excavator?

What best describes your skill level operating a bulldozer?

Snowplowing:

Describe any experience you may have had snowplowing. Include the size of the plow(s) you have driven, number of months/years of snow plowing experience and type of area(s) plowed (roads, driveways, parking lots):

OTHER TRAINING, SKILLS, AND/OR LICENSES

Please list/describe any specialized training, apprenticeship, certifications, licenses, skills, special skills and qualifications related to the job for which you are applying, such as machines you are able to operate, languages you speak and read or write well, computer skills besides those mentioned in the previous page, and any other special abilities or knowledge. Give name and location where training was given, dates attended, subject of training, total number of training hours, and other details.

List professional, trade, business or civic activities and offices held: *(You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.)*

DRIVER'S LICENSE: If the position for which you are applying will require you to operate a vehicle:

- (1) You must possess a valid driver's license;
- (2) Any special endorsements must be current and valid;
- (3) If you are offered employment by the City of Milford, and if your driver's license is from another state, you may be required as a condition of employment to obtain a valid Connecticut Driver's License before you can begin work.

Do you have a valid driver's license: Yes No State _____
 Expiration Date _____ Classification _____ License # _____

FINALISTS MAY BE REQUIRED, UPON NOTIFICATION, TO SUBMIT A COPY OF THEIR DRIVING ABSTRACT. Note: Driving abstracts may be obtained at any Connecticut Department of Motor Vehicles office. This fee is at the finalist's expense.

PROFESSIONAL REFERENCES

List three professional or business references who are not your relatives or employees of the City of Milford. State the nature of the relationship (i.e., co-worker, supervisor, associate, customer).

Name	Address	Phone	Relationship	Years Known

IMPORTANT: Read each of the following sections carefully and completely. If you do not understand any portion of the statements that follow, ask for clarification. Your signature indicates that you have read and understand each of the provisions listed and that you agree to abide by the conditions stated therein.

NOTICE TO PERSONS WITH DISABILITIES: Testing arrangements to accommodate persons with disabilities will be made upon request of the applicant. If accommodation is requested, the applicant will be required to state what accommodation is needed.

PRE-EMPLOYMENT MEDICAL EXAMINATION: Applicants selected for employment may be required to pass a medical examination given by a physician designated by the City of Milford.

PROBATIONARY PERIOD: Employees serve a probationary period as determined by City policy or by any applicable collective bargaining agreement. Termination of employment during the probationary period may be with or without cause and is not subject to any appeal process or grievance procedure of any applicable collective bargaining agreement.

DRUG POLICY: It is the policy of the City of Milford to maintain a drug free workplace. Employees who are observed in possession of or using controlled substances (drugs) will be terminated and may have criminal actions filed against them. Employees in certain positions are subject to Federal laws requiring pre-employment, post-accident, and random drug testing.

UPON EMPLOYMENT, YOU WILL BE REQUIRED TO PROVIDE YOUR SOCIAL SECURITY NUMBER.

PRE-EMPLOYMENT STATEMENT

AGREEMENT: I CERTIFY THAT ALL STATEMENTS MADE ON OR IN CONNECTION WITH THIS APPLICATION ARE TRUE, ACCURATE, COMPLETE, AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT INCOMPLETE, FALSE, INACCURATE, OR MISLEADING INFORMATION GIVEN IN MY APPLICATION, INTERVIEW(S) OR DURING THE COURSE OF MY EMPLOYMENT MAY RESULT IN THE REJECTION OF THIS APPLICATION OR WITHDRAWAL OF A JOB OFFER. FURTHER, FALSE INFORMATION PROVIDED, WHETHER WILLINGLY OR ACCIDENTALLY, MAY RESULT IN DISCIPLINE OR IMMEDIATE DISMISSAL IF EMPLOYED, WHENEVER THE OMISSION OR FALSEHOOD IS DISCOVERED.

I UNDERSTAND THAT THIS APPLICATION IS NOT A CONTRACT OF EMPLOYMENT NOR IS IT A GUARANTEE OR INDICATION OF EMPLOYMENT. I ALSO UNDERSTAND THAT SHOULD I BE GRANTED AN INTERVIEW, THE REPRESENTATIONS THAT MAY BE MADE AT THE INTERVIEW ARE NOT TO BE CONSTRUED AS CREATING ANY OBLIGATION, PROMISE OR CONTRACT ON BEHALF OF THE CITY OF MILFORD. SHOULD I BE EMPLOYED BY THE CITY, IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO ABIDE BY ALL THE RULES, POLICIES AND REGULATIONS OF THE CITY OF MILFORD, AS THEY MAY FROM TIME TO TIME BE IMPLEMENTED OR REVISED. IDENTIFICATION AND VERIFICATION OF ELIGIBILITY TO WORK IN THE UNITED STATES MUST BE SATISFIED FOR EMPLOYMENT.

I FURTHER UNDERSTAND THAT IN CONSIDERATION FOR EMPLOYMENT, AN INVESTIGATIVE BACKGROUND REPORT MAY BE PREPARED AT THE REQUEST OF THE CITY OF MILFORD, WHEREBY INFORMATION MAY BE OBTAINED FROM MY EMPLOYERS (PRESENT OR FORMER), EDUCATIONAL INSTITUTIONS, ALL BRANCHES OF THE U.S. MILITARY SERVICE, AND PUBLIC RECORDS MAINTAINED BY GOVERNMENT AGENCIES OR OTHERS, INCLUDING BUT NOT LIMITED TO CRIMINAL CONVICTION REPORTS, CREDIT REPORTS, ETC. I AUTHORIZE THE CITY OF MILFORD AND ITS DESIGNATED REPRESENTATIVE(S) TO PERFORM THIS INVESTIGATION, AND FURTHER AUTHORIZE PRESENT AND FORMER EMPLOYERS, REFERENCES AND OTHER PERSONS TO PROVIDE INFORMATION FOR THE INVESTIGATION. I ALSO AUTHORIZE THE CITY OF MILFORD TO RECEIVE CRIMINAL CONVICTION RECORDS PERTAINING TO ME, WHICH MAY BE IN THE FILES OF ANY CRIMINAL JUSTICE AGENCY

I UNDERSTAND THAT ACCEPTANCE FOR EMPLOYMENT SHALL DEPEND ON SATISFACTORY REPLIES FROM MY REFERENCES AND OTHER BACKGROUND CHECKS. ANY OFFER OF EMPLOYMENT MAY BE CONTINGENT UPON PASSING A DRUG TEST AND MEDICAL EXAMINATION. I AUTHORIZE MEDICAL PROVIDER(S) TO RELEASE ANY/ALL MEDICAL INFORMATION TO THE CITY PURSUANT TO ITS PRE-EMPLOYMENT PHYSICAL AND DRUG SCREEN PROCEDURES IN ACCORDANCE WITH HIPAA.

RELEASE: I HEREBY RELEASE AND HOLD HARMLESS ANY PERSON, CORPORATION, COMPANY FROM ANY AND ALL POSSIBLE DAMAGES, DIRECT OR CONSEQUENTIAL, IMMEDIATE OR REMOTE, OF ALL FORMS OR TYPES, THAT I MAY SUSTAIN OR ALLEGE TO SUSTAIN BY VIRTUE OF THAT PERSON, CORPORATION, COMPANY OR OTHER ENTITY COMPLYING WITH MY REQUEST TO FULLY AND COMPLETELY COMPLY WITH THE INVESTIGATION, INQUIRY OR INTERESTS OF THE CITY OF MILFORD, TO WHOM I HAVE MADE AN APPLICATION OF EMPLOYMENT AND IS THE BEARER OF THIS AUTHORIZATION.

SIGNATURE of APPLICANT		DATE
------------------------	--	------



INVITATION TO SELF-IDENTIFY

City of Milford

Position applying for
(use the title that appears on the job announcement)

SECTION 1: CANDIDATE INFORMATION

It is the policy of the City of Milford to recruit, hire, and promote qualified people in all job classifications regardless of age, race, gender, color, religion, creed, national origin, marital or veteran status, sexual orientation, gender identity or expression, disability or any other legally protected status, unless they are bona-fide occupational qualifications.

The following information is needed for compliance with governmental reporting requirements. While completion of this section is voluntary, all applicants are strongly urged to complete this as part of the pre-employment process. Applicants so choosing, may identify on the form that they have chosen not to provide the City of Milford with the requested information by checking the appropriate box in Section 4. This information will not affect in any way your employment opportunities. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable federal laws, executive orders, and regulations, including those which require the information to be summarized and reported to the Federal Government for civil rights enforcement purposes.

SECTION 2: GENERAL INFORMATION

Name _____ Date _____

Social Security Number 000 (Last six digits ONLY)

SECTION 3: STATISTICAL INFORMATION

PLEASE ANSWER THE FOLLOWING QUESTION:

What is your race/ethnicity? (Please mark the **ONE BOX** that describes the race/ethnicity category with which you primarily identify.)

Race/Ethnic Identification

(Not Hispanic or Latino) All persons having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

(Not Hispanic or Latino) All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Phillipine Islands, Thailand, and Vietnam.

(Not Hispanic or Latino) All persons having origins in any of the black racial groups of Africa.

All persons of Cuban, Mexican, Puerto Rican, Central or South America, or other Spanish culture or origin, regardless of race.

(Not Hispanic or Latino) All persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or Pacific Islands.

(Not of Hispanic or Latino origin.) All persons having origins in any of the original peoples of Europe, the Middle East, or North Africa.

A person who primarily identifies with two or more of the above race/ethnicity categories.

Gender Male Female

SECTION 4: NON-PARTICIPATION

Please check box if applicable

I have read the above statement and have chosen not to complete this form.

SECTION 5: RECRUITING INFORMATION

How did you hear about this job? (Please check one.)

<input type="checkbox"/> Milford Mirror	<input type="checkbox"/> Human Resources or Department Bulletin Board
<input type="checkbox"/> Other newspaper (give name):	<input type="checkbox"/> Community Agency (give name):
<input type="checkbox"/> City Website	<input type="checkbox"/> Professional Journal (give name):
<input type="checkbox"/> Internet (list site):	<input type="checkbox"/> Other (please specify):
<input type="checkbox"/> City Employee	