



**CITY OF
STAMFORD**

innovating since 1641

**The City of Stamford,
Department of Health**

accepting applications for

Per-Diem Public Health Nurses

\$50 per hour

Summary: Under the general direction of the Director of Nursing Services or other supervisor, performs public health nursing activities in schools or in assigned areas of the city; assists physicians in conducting public health programs in schools, homes or institutions; does other related work as directed.

MINIMUM QUALIFICATION REQUIREMENTS: Graduation from an accredited school of nursing and one (1) year of full-time nursing experience.

Note: Graduation from an accredited college or university with a Bachelors' or Masters' Degree in Nursing may substitute for the one (1) year of full-time nursing experience.

SPECIAL REQUIREMENT: Registered Nurse in the State of Connecticut and be CPR/ AED Certified. Applicants must attach legible copy of license to their application.

HOW TO APPLY

Interested candidates should complete the attached application and include copies of your license and certificates as requested.

Application Materials should be scanned and e-mailed to HrRecruiting@stamfordct.gov with Per-Diem PHN in the subject. No individual photos will be accepted, please scan and submit as one document. Thank you!



APPLICATION FOR EXAMINATION OR EMPLOYMENT

The City of Stamford
Human Resources Division
888 Washington Boulevard
P.O. Box 10152
Stamford, CT 06904-2152
Tel. (203) 977-4070

Position applying for
Use Title on Job Announcement

Exam Number

DO NOT WRITE IN THIS SPACE

- ☐ Q _____
☐ NQ _____
☐ Educ _____ Reviewer
☐ Exp _____
☐ Not City EE _____
☐ Other _____

PLEASE TYPE OR PRINT CLEARLY

All blanks must be completed in order for application to be considered

Please note that the information you provide on this application/examination will be used to determine if you are qualified for further consideration in the position in which you are applying. Failure to provide adequate or detailed information necessary to determine your qualifications may result in you being disqualified for a position. There may also be a supplement to this application for the position for which you are applying. Please make sure you submit ALL required materials.

GENERAL INFORMATION

Name _____
(Last) (First) (Middle)

Address _____
(Street/apt #) (City) (State) (Zip Code)

Home Telephone _____ Work Telephone _____
(Area Code) (Area Code)

Cell Phone _____ Email Address _____
(Area Code)

Social Security Number (Last 6 digits) XXX _____

Do you claim 5 points preference based on active duty in the US Armed Forces? Yes No

Do you claim 10 points preference based on veteran's disability? ☐ Yes No

Have you ever been employed by the City of Stamford? ☐ Yes No

If yes, job title(s) and dates of employment

Job Title _____ Dates _____

Reason for leaving _____

RECORD OF EDUCATION

TYPE OF SCHOOL	NAME OF SCHOOL AND CITY/STATE	DATES ATTENDED	COURSE OF STUDY (Major/Minor)	GRADUATED (Yes/No)	DEGREE, DIPLOMA, G.E.D., AND CERTIFICATE OR CREDITS COMPLETED
HIGH SCHOOL					
COLLEGE OR UNIVERSITY					
COLLEGE OR UNIVERSITY					
COLLEGE OR UNIVERSITY					

Other Training/Certifications (special courses, work training programs, armed forces training) related to the job for which you are applying. Give name and location where training was given, dates attended, subject to training, number of hours weekly and other details.

Summarize any other Special skills or Abilities relating to the job you are applying for, such as licenses, machines you operate, languages you speak, read and write well, computer skills and any other special abilities or knowledge.

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 included with a **completed application**.

Name of Employer _____ Dates of Employment _____

From/To

Employer Address _____ #of hour per week _____

Your most recent position (Title) _____

Supervisor's Name _____ Reason for leaving _____

Describe your duties: (please provide detail sufficient for the examiner to determine if you meet the requirements of the job for which you are applying). _____

Name of Employer _____ Dates of Employment _____

From/To

Employer Address _____ #of hour per week _____

Your most recent position (Title) _____

Supervisor's Name _____ Reason for leaving _____

Describe your duties: (please provide detail sufficient for the examiner to determine if you meet the requirements of the job for which you are applying). _____

Name of Employer _____	Dates of Employment _____
	From/To
Employer Address _____	#of hour per week _____
Your most recent position (Title) _____	
Supervisor's Name _____	Reason for leaving _____
Describe your duties: (please provide detail sufficient for the examiner to determine if you meet the requirements of the job for which you are applying). _____	

Name of Employer _____	Dates of Employment _____
	From/To
Employer Address _____	#of hour per week _____
Your most recent position (Title) _____	
Supervisor's Name _____	Reason for leaving _____
Describe your duties: (please provide detail sufficient for the examiner to determine if you meet the requirements of the job for which you are applying). _____	

Do you have any objections to the Human Resources Division verifying your work experience and/or educational qualifications?

A. Your former employer? ☐ **Yes** ☐ **No**

B. Your present employer? ☐ **Yes** ☐ **No**

I hereby authorize the City of Stamford to verify my work experience and/or educational qualifications.

Applicant's Signature _____

COMMENTS

MILITARY INFORMATION

Veteran of U.S. Armed Forces	Service Branch	Date Discharged	Type of Discharge	Final Rank
☐ Yes ☐ No				

PRE-EMPLOYMENT STATEMENT (Read Carefully)

I certify that all statements made on or in connection with this application are true, 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; withdrawal of a job offer; or discipline, up to and including termination of employment. Further, false information provided, whether willingly or accidental, may result in my 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. Should I be employed by the City, in consideration of my employment, I agree to conform to the rules and policies of the City of Stamford, 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 Stamford by an independent party, 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 Stamford 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 Stamford 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. In the event I receive a job offer, I also understand that I will be subject to a drug test and medical examination that I must pass before I commence work.

I have read, understood, and agree to the foregoing. I hereby authorize the City of Stamford to verify my work experience and/or qualifications

Applicant's Signature _____

APPLICANT DISCLOSURE FORM

CANDIDATE INFORMATION

It is the policy of the City of Stamford to recruit, hire and promote qualified people in all job classification regardless of age, race, sex, color, religion, national origin, marital status, veteran status or disability unless they are bona-fide occupational qualifications.

The following information is needed for compliance with governmental report requirements. While completion of this section is voluntary, we strongly urge that all applicants complete this as part of the pre-employment process. Applicants so choosing, may identify on the form that have chosen not to provide the City of Stamford with the requested information by checking the appropriate box in section four. This information will not affect in any way your employment opportunities.

GENERAL INFORMATION

Your Name _____

Date _____

Social Security Number (Last 6 digits) XXX _____

STATISTICAL INFORMATION

Race/Ethnic Identification (Please check one)

- | | |
|--|--|
| ☐ American Indian or Alaska Native | ☐ 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. |
| ☐ Asian | ☐ All persons having origins in any of the original peoples of Far East, Southeast Asia, or the Indian Subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam. |
| ☐ Black or African American | ☐ (Not Hispanic or Latino origin). All persons having origins in any of the black racial groups of Africa. |
| ☐ Hispanic or Latino | ☐ All persons of Cuban, Mexican, Puerto Rican, Central or South America, or other Spanish culture or origin, regardless of race. |
| ☐ Native Hawaiian or Other Pacific Islander | ☐ All persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or Pacific Islands. |
| ☐ White | ☐ (Not Hispanic or Latino origin). All persons having origins in any of the original peoples of Europe, the Middle East or North America. |
| ☐ Other | ☐ Please Specify: _____ |

Job Classification

Please write the title of the position for which you are applying in the box above, using the title of Job Announcement.

Gender

Female

☐

Male

☐

NON-PARTICIPATION

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

☐

(Please check box if applicable)

RECRUITING INFORMATION

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

- | | |
|---|---|
| ☐ Stamford Advocate | ☐ Human Resources Division Bulletin Board |
| ☐ Other newspaper:
Please give name _____ | ☐ Community Agency
Please give name _____ |
| ☐ City Website | ☐ Professional journal _____ |
| ☐ Internet
Please give name _____ | ☐ Other: Please specify _____ |
| ☐ City Employee | |