

**FAIRFIELD PUBLIC SCHOOLS**  
**P.O. Box 320189 • 501 Kings Highway East**  
**Fairfield, CT 06825 • (203) 255-8370**

**APPLICATION FOR FOOD SERVICES EMPLOYMENT**

What assignment are you applying for, or what have you been assigned to? \_\_\_\_\_

**GENERAL INFORMATION**

1. Name \_\_\_\_\_  
                    Last                      First                      Middle Initial                      Social Security No.

2. Address \_\_\_\_\_  
                    Street                      City                      State                      Zip                      Home Phone

If we may contact you at work, please indicate your phone number: \_\_\_\_\_

3. Is there anything that would prevent you from performing the duties of an assignment? If yes, explain:  
\_\_\_\_\_  
\_\_\_\_\_

4. Have you ever been convicted of a felony or any other criminal offense, either within or outside the State of Connecticut?

No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, identify the approximate date, location and nature of each such conviction on a separate sheet of paper and attach to this application. NOTE: For purposes of this application, a plea of "no contest" or "nolo contendere" is a conviction.

Has there ever been a disposition of criminal charges against you other than a dismissal or acquittal?

No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, identify the approximate date, location and nature of each such disposition and the nature of the charges against you on a separate sheet of paper and attach to this application.

Are any criminal charges currently pending against you either within or outside the State of Connecticut?

No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, identify the jurisdiction in which such charges are pending, the nature of the charges against you and provide an explanation on a separate sheet of paper and attach to this application.

Are you currently enrolled in a program of deferred adjudication (e.g., accelerated rehabilitation, pre-trial drug or alcohol education, pursuant to Connecticut General Statutes §54~56g)?

No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, identify the jurisdiction in which such program is pending and provide an explanation of the nature of such program and the criminal charges against you on a separate sheet of paper and attach to this application.

**EDUCATIONAL/TECHNICAL PREPARATION**

	Name of school	Location	Dates Attended	Diploma or Degree	Major	Year of Grad.
High School						
Additional Schooling						

Additional Courses or Training:

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**WORK EXPERIENCE - List all pertinent, gainful work experience, starting with most recent position.**

Name & Address of Employer	From/ To	Title/Duties of Assignment	Supervisor	Salary	Reason for Leaving

Please describe any knowledge or skills that would assist us when considering your candidacy:

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**PERSONAL REFERENCES - List three persons not related to you, whom you have known for at least five years - not former employers.**

Name	Address	Telephone

I understand that if I am employed by the Fairfield Board of Education I will be required to submit to a state and national criminal history records check within 30 days from my employment and I will be required to submit to fingerprinting, at my expense, for purposes of submitting my fingerprints to the

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Federal Bureau of Investigation for a national criminal history records check. I further understand and agree that if I have been convicted of a crime that has not been disclosed as part of my application for employment, my employment will be subject to termination.

I hereby authorize any and all law enforcement agencies, current and former employers, credit agencies and academic institutions and any other persons or entities to supply any information regarding my background to the Fairfield Public School System and to its agents and employees, and I hereby release all such former employers, law enforcement agencies, credit agencies and academic institutions, other persons or entities, and their agents and employees from any liability arising from the supplying and use of such information.

I declare under the penalties of false statement that I have read and understand the terms of this employment application and attest to the truth and accuracy of the information I have provided herein. I understand that false or misleading statements on this application shall be a basis for disqualification from further consideration for employment and, if I am employed, for dismissal from employment.

Date: \_\_\_\_\_

Name (please print) \_\_\_\_\_

Applicant's Signature \_\_\_\_\_

*Please return completed application to:*

Fairfield Public Schools  
Food Service Department  
501 Kings Highway East, Suite 210  
Fairfield, CT 06825

*Consistent with Board of Education policies, the provision for educational programs and activities and all personnel actions are administered without regard to all protected categories.*

Transcripts, placement papers, recommendations, certification, and any other exhibits that would enhance your candidacy should be forwarded. If any information changes or requires updating, it is the candidate's responsibility to inform the Human Resources Office. Applications will be kept active for one year and will be referred to should vacancies occur.

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