

Department of Human Resources

Application for Clerical, Maintenance and Protective Services* Positions

(* To apply for UConn Police Officer positions, please refer to the Police Department's website at [UConn Police Officer Application Process](#))

INSTRUCTIONS TO SAVE AND UPLOAD APPLICATION FORM

Please review the following instructions on how to complete the fillable, UConn Application form:

- Use only the latest version of Adobe Reader to complete the application. Macintosh and Windows versions of the free Adobe Reader are available from Adobe at <http://get.adobe.com/reader/>.
- Avoid completing the application online within your web browser using a built-in PDF viewer or by using MAC Preview (Macintosh OS).
- Before completing the application, save the UConn application form (PDF format) to a drive or location on your computer (e.g., Local Disk (C:), My Documents folder). The "Save" button on the form will open a "Save As" dialog box, allowing you to save the application to a location on your computer. If you are viewing the form in a built-in PDF viewer (e.g., Chrome, Firefox), right-click the PDF, select "Save As" or "Save Page As" and verify the "Save As" type is set to Adobe Acrobat Document (*.pdf).

You may also save the PDF form without opening the file in either Adobe Reader or in any built-in PDF viewer. Just right-click on the hyperlink for the PDF form and then choose the "Save Link As"... or "Save Target As"... option.

Note: If you wish to print the application, handwrite your information (must be legible), scan, save and upload it to the job, that is acceptable too

- Write down the file name and location of the saved file.
- Once you have saved the application to your computer, you can fill out the form. Please be aware the fillable PDF forms will not save automatically. Periodically, save the information on the UConn application by using the "Save" button located on the form or by clicking "File > Save (or Save As)" on the Adobe Reader menu bar. Use the same file name and location that was written down.
- After you have completed the UConn application, save a final version of the file to your computer.
- Apply online via jobs.uconn.edu and upload the completed application as an additional attachment (Attachment Type: UCONN Application for Employment).

Additional help documentation is available at <http://hr.uconn.edu/careers-site-help-documentation/>.



DEPARTMENT OF HUMAN RESOURCES

Application for Clerical, Maintenance and Protective Services* Positions

(*To apply for UConn Police Officer positions, please refer to the Police Department's website at UConn Police Officer Application Process)

Instructions: Please read the detailed job posting before completing this application form. In order to be considered further in the application process, this application must be completed in its entirety, including specific dates (MONTH, DAY and YEAR) in the work experience section. A resume may be attached, but cannot substitute for completing the application.

APPLICANT PROFILE (Please print or type)

Date _____

Last Name _____ First _____ M. I. _____

Street Address _____ City _____ State _____ Zip Code _____

Home Phone # _____ Cell Phone # _____ Email Address _____

WORK PREFERENCES (Please check all that apply)

Campus Locations: Avery Point Hartford Campus Stamford Campus Storrs Campus Waterbury

Schedule: Full-time Part-time Either First Shift Second Shift Any

Work days: Monday Tuesday Wednesday Thursday Friday Saturday Sunday

EDUCATION LEVEL

Less than High School Grad High School Grad or Equivalent Some College (Number of Credits Hours) _____ Technical School 2 year College Degree

Bachelor's Level Degree Some Grad School Master's Level Degree Doctorate (Academic) Doctorate (Professional)

High School Information: City _____ State _____ HS Name _____

College/Univ Information: State _____ College _____ Major _____ Degree _____ Year _____

Other School/Training: State _____ College _____ Course of Study _____ Year _____

Attach additional sheets if you attended more than three (3) other schools, training or colleges/universities.

What languages to you speak, read, write or sign fluently? _____

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STATE EMPLOYMENT HISTORY (Must be completed by current or former State of Connecticut employees)

Are you a current State of Connecticut employee? No Yes

If Yes, provide your six (6) digit Employee ID Number: _____

Official Job Class Title: _____ Employing Agency, Department, College/University: _____

If you are not a current State of Connecticut employee but worked for the State of Connecticut previously, did you leave State service within the past ten (10) years?

Yes No If Yes, complete dates of employment: From: / / To / /
MM DD YYYY MM DD YYYY

Official Job Class Title at time of separation: _____ Employing Agency, Department, College/University: _____

Reason for leaving: _____

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EMPLOYMENT HISTORY

Important Instructions for Completing this Section. Beginning with your PRESENT or MOST RECENT employment or volunteer experience and **working backward**, list all positions held that you wish to be considered toward meeting the eligibility requirements (minimum qualifications) stated on the job posting. **List all positions (job titles) separately, even if with the same employer.** Provide the starting and ending dates (**month, day and year**) of your employment for each position and indicate if the position was full or part time and the number of hours worked per week.

Clearly describe the work (duties) you **personally performed** in **each** position. If a job included a mixture of relevant duties and other duties that are not relevant toward meeting the eligibility requirements, specify the percentage of time spent performing each duty. Make additional copies of this page, as needed, to list additional positions, and continue the number sequence.

If you need additional **space for the descriptions of your duties** for one or more positions, attach an 8 1/2" x 11" sheet with **your name and the position title** and continue the descriptions of your duties, using the number sequence to identify which positions the duties belong to.

You **must** fill out this application completely. Failure to provide all of the REQUIRED information for each position held may result in your application being disapproved. Although a resume can be attached, only jobs included in this section of the application form will be considered when determining if you meet the required minimum qualifications for the position for which you are applying.

1. Start Date: / / End Date: / / Official Job Title: _____
MM DD YYYY MM DD YYYY

Employer: _____ Phone #: _____ City: _____ State: _____

Type of Business: _____ Official Job Title of Immediate Supervisor: _____

List all major duties and responsibilities performed by you in this job.

This job is/was: Full-time Part-time Per diem Number of hours worked per week: _____

Reason for Leaving: Career Progression Dissatisfied Relocation Other _____

If still employed, may we contact your present employer? Yes No If no, please explain: _____

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2. Start Date: / / End Date: / / Official Job Title: _____
MM DD YYYY MM DD YYYY

Employer: _____ Phone #: _____ City: _____ State: _____

Type of Business: _____ Official Job Title of Immediate Supervisor: _____

List all major duties and responsibilities performed by you in this job.

This job is/was: Full-time Part-time Per diem Number of hours worked per week: _____

Reason for Leaving: Career Progression Dissatisfied Relocation Other _____

If still employed, may we contact your present employer? Yes No If no, please explain: _____

3. Start Date: / / End Date: / / Official Job Title: _____
MM DD YYYY MM DD YYYY

Employer: _____ Phone #: _____ City: _____ State: _____

Type of Business: _____ Official Job Title of Immediate Supervisor: _____

List all major duties and responsibilities performed by you in this job.

This job is/was: Full-time Part-time Per diem Number of hours worked per week: _____

Reason for Leaving: Career Progression Dissatisfied Relocation Other _____

If still employed, may we contact your present employer? Yes No If no, please explain: _____

4. Start Date: / / End Date: / / Official Job Title: _____
MM DD YYYY MM DD YYYY

Employer: _____ Phone #: _____ City: _____ State: _____

Type of Business: _____ Official Job Title of Immediate Supervisor: _____

List all major duties and responsibilities performed by you in this job.

This job is/was: Full-time Part-time Per diem Number of hours worked per week: _____

Reason for Leaving: Career Progression Dissatisfied Relocation Other _____

If still employed, may we contact your present employer? Yes No If no, please explain: _____

5. Start Date: / / End Date: / / Official Job Title: _____
MM DD YYYY MM DD YYYY

Employer: _____ Phone #: _____ City: _____ State: _____

Type of Business: _____ Official Job Title of Immediate Supervisor: _____

List all major duties and responsibilities performed by you in this job.

This job is/was: Full-time Part-time Per diem Number of hours worked per week: _____

Reason for Leaving: Career Progression Dissatisfied Relocation Other _____

If still employed, may we contact your present employer? Yes No If no, please explain: _____

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REQUIRED EXAMINATION SCORES, LICENSES, and CERTIFICATIONS

If you have taken and passed any State of Connecticut Exams, please complete the following:

Exam Title: _____ Expiration Date: / /
MM DD YYYY

Exam Title: _____ Expiration Date: / /
MM DD YYYY

Exam Title: _____ Expiration Date: / /
MM DD YYYY

Do you have any valid licenses or certificates which authorize you to practice a profession or trade? (e.g. law, nursing, psychology, plumbing, etc.) Yes No

If yes, please complete the following section:

Type of License/Certification: _____ License/Cert #: _____

Issued By: _____ Date Issued: / / Expiration Date: / /
MM DD YYYY MM DD YYYY

Type of License/Certification: _____ License /Cert #: _____

Issued By: _____ Date Issued: / / Expiration Date: / /
MM DD YYYY MM DD YYYY

Do you currently have a valid Motor Vehicle Driver's License (Class D)? Yes No State: _____

List any endorsements you have to your Class D license. _____

Do you currently have a valid Commercial Driver's license (CDL)? Yes No State: _____ What Class? Class A Class B Class C

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REFERENCES (Please list the names and contact information for three **work related** references)

1. Name: _____ Title: _____ Telephone Number (include area code): _____

Business/ Company Name _____ Address: _____
Street City State

Relationship to you (owner, supervisor, co-worker, etc): _____ How many years? _____ Are they still employed with the company/business? Yes No

2. Name: _____ Title: _____ Telephone Number (include area code): _____

Business/ Company Name _____ Address: _____
Street City State

Relationship to you (owner, supervisor, co-worker, etc): _____ How many years? _____ Are they still employed with the company/business? Yes No

3. Name: _____ Title: _____ Telephone Number (include area code): _____

Business/ Company Name _____ Address: _____
Street City State

Relationship to you (owner, supervisor, co-worker, etc): _____ How many years? _____ Are they still employed with the company/business? Yes No

TERMS AND AGREEMENTS

By signing or typing my name on the signature line below, I am certifying that the statements made by me on this application form and attachments, if any, are true and complete to the best of my knowledge, are made in good faith and are subject to verification as a condition of employment. I understand that intentional falsification of my application material may result in disqualification of my candidacy or termination of employment.

Applicants offered employment with the University of Connecticut may be required to complete a pre-employment physical, education and criminal background check and/or drug test. (Requirements will vary with the nature of the position for which you are applying.)

I agree to these terms I do not agree to these terms

Signature
(A typed name will substitute for a handwritten signature.)

Date