

# SUMMER EMPLOYMENT OPPORTUNITY

The Milford Police Department is looking to hire four (4) seasonal Parking Enforcement Officers.

## Description:

Parking Enforcement Officers will monitor Milford parks and beaches for parking violations and issue appropriate enforcement.

## Responsibilities/Tasks:

Provides public safety by enforcing motor vehicle parking regulations and ensures that the public complies with the local parking rules and regulations for the City of Milford. Issues warnings and citations for illegal parking and promotes good community relations.

## Qualifications:

- High School diploma or GED equivalent.
- Ability to learn the techniques of parking enforcement procedures and traffic control
- Understand and follow directions
- Deal tactfully and effectively with the public and other employees of the City of Milford
- Must have and maintain a valid CT driver's license; ability to operate a motor vehicle.
- Background checks are required.

## Scope/Salary:

- 19 hours per week
- \$20.00 per hour
- Uniform will be provided

If interested, please submit application (found attached) to Sergeant Jay Kranyak at [jkranyak@milfordct.gov](mailto:jkranyak@milfordct.gov).

# City of Milford, Connecticut

## DEPARTMENT OF POLICE

430 Boston Post Road \* Milford, CT 06460-2570

Telephone (203) 878-6551

### APPLICATION FOR EMPLOYMENT

NAME OF APPLICANT: \_\_\_\_\_

APPLICANT: a copy of the following, if applicable, must be submitted with your application for employment:

1. Birth Certificate
2. High School Diplomas or Equivalency
3. Connecticut Motor Vehicle Operator's License
4. Motor Vehicle Operator's License other Than Connecticut
5. Social Security Number

### APPLICATIONS WILL NOT BE ACCEPTED WITHOUT ALL REQUIRED DOCUMENTS. FOR OFFICE USE ONLY:

1. Birth Certificate \_\_\_\_\_
2. High School Diplomas \_\_\_\_\_
3. Operator's License \_\_\_\_\_
4. Motor Vehicle Operator's License other State(s)(If Applicable) \_\_\_\_\_
5. Social Security Number \_\_\_\_\_

DATE APPLICATION RECEIVED \_\_\_\_\_ TIME RECEIVED \_\_\_\_\_  
RECEIVED BY \_\_\_\_\_





**IF SPACE AVAILABLE FOR ANSWERING ANY QUESTION IS INSUFFICIENT, USE SEPARATE SHEET.**

**EMPLOYMENT:**

List chronologically, **your LAST TWO EMPLOYMENTS**, including summer and part-time employment, paid or unpaid.

1. Name \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Salary \_\_\_\_\_ Kind of Work \_\_\_\_\_  
Name of Immediate Supervisor \_\_\_\_\_ Phone No. \_\_\_\_\_  
Name of President/ Dept. Head \_\_\_\_\_  
Address \_\_\_\_\_  
Street City State Zip Code  
Reason for Leaving \_\_\_\_\_  
\_\_\_\_\_

2. Name \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Salary \_\_\_\_\_ Kind of Work \_\_\_\_\_  
Name of Immediate Supervisor \_\_\_\_\_ Phone No. \_\_\_\_\_  
Name of President/ Dept. Head \_\_\_\_\_  
Address \_\_\_\_\_  
Street City State Zip Code  
Reason for Leaving \_\_\_\_\_  
\_\_\_\_\_

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**EDUCATION:**

Elementary School \_\_\_\_\_ Location \_\_\_\_\_  
Junior High School \_\_\_\_\_ Location \_\_\_\_\_  
High School \_\_\_\_\_ Location \_\_\_\_\_  
Name City State Zip Code  
Dates Attended: \_\_\_\_\_ to \_\_\_\_\_  
Diploma Received? \_\_\_\_\_  
College \_\_\_\_\_  
Location \_\_\_\_\_  
Date of Diploma or Degree \_\_\_\_\_  
Major \_\_\_\_\_ Minor \_\_\_\_\_

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**CRIMINAL RECORD:**

Have you ever been arrested for, or convicted of any crime? Yes\_\_\_\_\_No \_\_\_\_\_

If yes, give complete details, including dates of arrest(s) and hearing(s), location of offense(s), charge(s), details of incident(s) and disposition.

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**Motor Vehicle Record**

Have you been arrested or convicted of a motor vehicle offense or received a motor vehicle infraction, citation, summonses, ticket?

Yes\_\_\_\_\_No\_. If yes, list the offense(s), date(s), location(s), and disposition(s).

<u>Offense</u>	<u>Date</u>	<u>Location</u>	<u>Disposition</u>
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**Notice to Applicants:**

- 1. The applicant is not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to Section 46B-146, 54-760 or 54-142A (e.g. nolle, dismissed, pardoned).**
- 2. That criminal records subject to erasure pursuant to Section 46B, 54-760 or 54-142A are records pertaining to a finding of delinquency or that a child was a member of a family with service needs, an adjudication as a youthful offender, a criminal charge that has been dismissed or nolle, a criminal charge for which the person has been found not guilty or a conviction for which the person received an absolute pardon, and**
- 3. That any person whose criminal records have been erased pursuant to Section 46B-146, 54-760 or 54-142A shall be deemed to have never been arrested within the meaning of the General Statutes with respect to the proceedings so erased and may so swear under oath.**

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**FULL DISCLOSURE**

Is there anything in your past or present, not specifically asked in this questionnaire, which, if it became known, would embarrass you, your school or the Department so as to possibly cause you to compromise the integrity of the Milford Police Department or any of its investigations.

**NOTE:** The answer to this question in and of itself will not preclude you from being an intern. It is merely being asked to fully appraise the Department of your background and prevent the possibility of compromising you in the future because of the Department's full and complete knowledge of you.

Yes\_\_\_\_\_No\_\_\_\_\_. If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**GENERAL INFORMATION:**

Are you a licensed Connecticut motor vehicle operator? Yes \_\_\_\_\_No \_\_\_\_\_

If yes, type: \_\_\_\_\_ License # \_\_\_\_\_

Have you ever possessed any operator's license, other than listed above? Yes \_\_\_\_\_No \_\_\_\_\_

If yes, state: \_\_\_\_\_ License # \_\_\_\_\_

Date: From: \_\_\_\_\_ to \_\_\_\_\_

Have you ever had any of the above operator's license(s) or motor vehicle registration(s) suspended or revoked for any reason? Yes \_\_\_\_\_No \_\_\_\_\_

Reason for suspension/revocation \_\_\_\_\_

State \_\_\_\_\_ Date of suspension/revocation \_\_\_\_\_

Are you presently applying or have you ever applied for employment or internship with any other law enforcement agency?

Yes \_\_\_\_\_No \_\_\_\_\_ Year Applied \_\_\_\_\_

If yes, List agencies or employers below:

\_\_\_\_\_  
\_\_\_\_\_

Have you ever been refused appointment/employment/internship with any law enforcement agency. Yes\_\_\_\_\_No \_\_\_\_\_

If so, identify agency and date, and state reason of refusal:

\_\_\_\_\_

Have you ever applied for a permit to carry a firearm or dangerous weapon?

Yes\_\_\_\_\_No\_\_\_\_\_ If yes, give date and location: \_\_\_\_\_

Are you or have you ever been a member of any organization, association, movement, group or combination of persons which advocates the overthrow of our Constitutional form of government or which has adopted the policy of advocating or approving the commission of acts of force or violence to deny other persons their rights under the Constitution of the United States or which seeks to alter the form of Government of the United States by unconstitutional means?

Yes\_\_\_\_\_No \_\_\_\_\_

If yes, what organization and what is your association with it? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ *Date*

\_\_\_\_\_ *Name Printed*

\_\_\_\_\_ *Signature*

Subscribed and sworn to before me on this date \_\_\_\_\_

\_\_\_\_\_ *Notary Public*



# City of Milford, Connecticut

## DEPARTMENT OF POLICE

430 Boston Post Road \* Milford, CT 06460-2570

Telephone (203) 878-6551

### AUTHORIZATION FOR THE RELEASE OF PERSONAL INFORMATION

I, \_\_\_\_\_, do hereby authorize a review of and full disclosure of all records or any part thereof, concerning myself, by and to any duly authorized agent of the Milford Police Department, whether said records are of a public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records of educational institutions, financial or credit institutions, including records of deposits, withdrawals, and balances of checking and savings accounts and loans, also the records of commercial or retail credit agencies (including credit reports and/or ratings); medical and psychiatric treatment and/or consultation, including hospitals, clinics, private practitioners and the U.S. Veterans Administration; public utilities, employment and pre-employment records, including background reports, polygraph exam, efficiency ratings, complaints, disciplinary matters and/or grievances filed by or against me and salary records; real and personal property tax statements and records wherever filed; records of complaints, arrest, trial and/or traffic records; probation records; records of complaints of a civil nature made by or against me, where ever located, and to include the records and recollection of attorneys-at-law or of other counsel, whether representing me or another person in a case in which I presently have or have had an interest.

It is the intent of this authorization to provide full and free access to the background and history of my personal life, for the specific purpose of pursuing a background investigation, which may provide pertinent data for the Milford Police Department to consider in determining my suitability for internship by that department. It is my specific intent to provide access to personal information, however personal or confidential it may appear to be, and the sources of information specifically enumerated above are not intended to deny access to any records not specifically mentioned herein.

I understand that any information obtained by the personal history background investigation, which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for internship by the Milford Police Department.

A photocopy of this release will be valid as an original hereof, even though the said photocopy does not contain original writing of my signature.

Dated: \_\_\_\_\_ Signature: \_\_\_\_\_ D.O.B. \_\_\_\_\_

Address: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Subscribed and Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

Seal

\_\_\_\_\_  
Notary Public – Justice of the Peace