# CITY OF STAMFORD
## AFFIRMATIVE ACTION/EQUAL OPPORTUNITY EMPLOYER

**The City of Stamford is an equal opportunity/affirmative action employer and strongly encourages the applications of women, minorities and persons with disabilities**

## OPEN COMPETITIVE EXAMINATION NO. 14-51

## NURSING ASSISTANT

**Salary Range: $17.3598 - $20.5034 PER HOUR**

**This posting is open to generate a list of eligibility candidates.**

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**DUTIES:** Under the direct supervision of a nurse, performs non-professional functions which contribute to the care, comfort, safety and quality of life of the residents on an assigned unit of the Smith House Nursing and Rehabilitation Center; does other related work as required.

**MINIMUM QUALIFICATION REQUIREMENTS:** Graduation from an accredited high school or high school equivalency program AND possession of a nursing assistant training certificate AND registration in good standing in the Connecticut Nurse Aide Registry as required by the Omnibus Budget Reconciliation Act (OBRA).

**SCOPE OF EXAMINATION:** There will not be a written examination. Applicants will be ranked according to their education, training and experience. Applicants are advised to fully complete the application form and supplement, listing all related degrees, training and work experience. Incomplete applications or supplements will be rejected.

**FILING REQUIREMENTS:** Interested candidates should submit an Employment Application and Application Supplement "14-51." Applications can be obtained at the City of Stamford, Human Resources Division, 9th Floor, and 888 Washington Boulevard, Stamford, Connecticut or at www.stamfordct.gov.

**Please note:** Only properly completed and submitted applications and application supplements will be considered. Applications of candidates who do not meet the stated position requirements will not be considered. A resume is not a substitute for a fully completed application.

**The Human Resources Department provides reasonable accommodation to persons with disabilities in accordance with the Americans with Disabilities Act (ADA). If you need an accommodation in the application or testing process, please contact the Human Resources Division.**

**Issued: 3/13/15**

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**EMPLOYEE BENEFITS:**
- Health plan and Hospitalization
- Paid Vacations and Holidays
- Retirement Plan
- Group Life Insurance
- Sick Leave

**Applications are obtained and submitted to:**
DEPARTMENT OF HUMAN RESOURCES
City of Stamford
888 WASHINGTON BOULEVARD
STAMFORD, CT 06904
TELEPHONE (203)977-4070
www.cityofstamford.org

**CHANGE OF ADDRESS**
It is your responsibility to notify the Department of Human Resources of any change of Address on your application

# 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

AN EQUAL OPPORTUNITY EMPLOYER

_____
Position applying for
Use Title on Job Announcement

_____
Exam Number

**DO NOT WRITE IN THIS SPACE**

☐ **Q** Rev. by: _____
☐ **NQ**
☐ **Educ**
☐ **Exp**
☐ **Not City EE**
☐ **Other** _____

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

## GENERAL INFORMATION

Name _____ _____ _____
*(Last)* *(First)* *(Middle)*

Address _____ _____ _____ _____
*(Street/Apt. #)* *(City)* *(State)* *(Zip Code)*

Home Telephone _____ *(Area Code)*

Work Telephone _____ *(Area Code)*

Cellular Telephone _____ *(Area Code)*

E-mail Address _____

Social Security Number 000 _____ _____
**(Last six digits ONLY)**

Best daytime contact: ☐ Home ☐ Work ☐ Cell

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

Are you currently authorized to work in the United States? ☐ Yes ☐ No

Note: 1986 Immigration Reform & Control Act requires verification of identity and employment eligibility at the time of hire.

Do you claim 10 points veteran's disability preference? ☐ Yes ☐ No
(Attach DD214 and supporting documentation)

Have you ever worked for the City of Stamford before? ☐ Yes ☐ No

If yes, list by dates employed and job title(s): _____

1. Have you ever been convicted of any offense other than juvenile, youthful offender, or a minor traffic violation? ☐ Yes ☐ No
If yes, you must complete Section B of the applicant disclosure form.

2. Have you ever been disqualified for a position with the City of Stamford due to a criminal conviction or failure to fully disclose a criminal conviction? ☐ Yes ☐ No
If yes, list job title and date of disqualification. _____

(Provide information regarding ACTUAL convictions only. Any arrest, charge, conviction and/or record which has been erased, dismissed, nolled or pardoned pursuant to the CGS § 31-51i, should NOT be disclosed. Disclosure of a criminal record will not necessarily disqualify you for employment. Each conviction will be evaluated on its own merits with respect to time, circumstances and seriousness, in relation to the job for which you are applying.)

## 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 of training, number of hours weekly, and other details.

Summarize any other Special Skills or Abilities relating to the job you want, such as: licenses, machines you operate, languages which you speak, read and write well, computer skills, and any other special abilities or knowledges.

## 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**.

1. Name and Address of Employer _____ Employed From _____ (Month Year) To _____ (Month Year)

_____ # of hours per week _____ Ending Salary _____

Supervisor Name, Title, Telephone _____

Your Title _____

Describe your duties: _____

Reason for leaving _____

## EMPLOYMENT HISTORY (Continued)

2. Name and Address of Employer _____ Employed From _____ (Month Year) To _____ (Month Year)

_____ # of hours per week _____ Last Salary _____

Supervisor Name, Title, Telephone _____

Your Title _____

Describe your duties: _____

_____

_____

_____

Reason for leaving _____

3. Name and Address of Employer _____ Employed From _____ (Month Year) To _____ (Month Year)

_____ # of hours per week _____ Ending Salary _____

Supervisor Name, Title, Telephone _____

Your Title _____

Describe your duties: _____

_____

_____

_____

Reason for leaving _____

4. Name and Address of Employer _____ Employed From _____ (Month Year) To _____ (Month Year)

_____ # of hours per week _____ Ending Salary _____

Supervisor Name, Title, Telephone _____

Your Title _____

Describe your duties: _____

_____

_____

_____

Reason for leaving _____

5. Name and Address of Employer _____ Employed From _____ (Month Year) To _____ (Month Year)

_____ # of hours per week _____ Ending Salary _____

Supervisor Name, Title, Telephone _____

Your Title _____

Describe your duties: _____

_____

_____

_____

Reason for leaving _____

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

If answer is "Yes" to either (A) or (B) explain under comments section

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<br>☐ 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.

Applicant's Signature _____ Date _____

# Applicant Disclosure Form

Section A

City of Stamford

## 1. CANDIDATE INFORMATION

It is the policy of the City of Stamford to recruit, hire, and promote qualified people in all job classifications 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 reporting 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 they 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. This form will be removed from the application.

## 2. GENERAL INFORMATION

Your Name _____ Date _____

Social Security Number 000 _____ _____ **(Last six digits ONLY)**

## 3. 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 the 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 of 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 of Hispanic or Latino origin) All persons having origins in any of the original peoples of Europe, the Middle East, or North Africa. |
| Other | ☐ | Please specify _____ |

**Job Classification**

_____

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

**Gender**

Female ☐

Male ☐

## 4. NON-PARTICIPATION

Please check box if applicable

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

## 5. RECRUITING INFORMATION

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

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

# Applicant Disclosure Form

City of Stamford

NOTE:
THIS INFORMATION WILL BE REVIEWED ONLY BY MEMBERS OF THE HUMAN RESOURCES DIVISION AND HIRING MANAGERS.

Section B

## CRIMINAL CONVICTION INFORMATION

Applicants are required to disclose the existence of *any* criminal conviction, regardless of the nature, date or location thereof, with the exception of minor traffic violations or an arrest, criminal charge, or conviction that has been erased**.** The types of records subject to erasure under Connecticut law are as follows: (a) a finding of delinquency or that a child was a member of a family with service needs; (b) a sentence as a youthful offender; (c) a criminal charge that was dismissed or "nolled"; (d) a criminal charge for which the person was found not guilty; and (e) a conviction for which the person received an absolute pardon.

The information provided below is subject to the terms of the "Pre-Employment Statement" on Page 4 of this application. A criminal conviction will not necessarily result in the rejection of this application, but will be considered as it relates to the nature of the position sought, and in light of any applicable state and federal law.

_____ _____
Name (Print) Title of Position Sought

_____ _____
Applicant's Signature Date

| *DATE OF CONVICTION* | *OFFENSE* | *DATE OF ARREST* | *PLACE OF ARREST (City/Sate)* | *SENTENCE* |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

# NURSING ASSISTANT

APPLICATION SUPPLEMENT # 14-51

NAME_____

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

You MUST fill out this supplement completely, in addition to the application, in order to be considered for the position of Nursing Assistant. You MUST also attach copies of the required documents.

I. MINIMUM QUALIFICATION REQUIREMENTS

A. Do you possess a Nursing Assistant Training Certificate? Yes _____ No _____

B. Do you possess registration in good standing in the Connecticut Nurse Aide Registration Program? Yes _____ No _____

Note: You MUST attach copies of the above-noted documents to your application.

II. AVAILABILITY:

NOTE: **Current vacancies are part time (19 hours or less per week, no benefits.)** The eligible list established from this exam will be used to fill the current part time vacancies and any that may occur in the next two years. For many years, the only Nursing Assistant hiring from the outside has been for part time positions. Vacancies that occur in Nursing Assistant positions that are more than 19 hours per week have been filled by Nursing Assistants already employed by Smith House who wish to increase their hours. Therefore, it is highly unlikely that applicants will initially be hired into anything other than part time positions. Applicants are encouraged to check off "part time" below, along with any other interest they have. (If you have no interest in part time employment, it is unlikely that you will ever have an opportunity for interview for the position of Nursing Assistant.)

Please check all that apply to you.

I am interested in

_____ part time. (19 hours or less per week, no benefits.)

_____ permanent part time. (20 hours or more but less than 37.5 hours per week, with benefits.)

_____ full time. (37.5 hours per week, with benefits.)

AN EOE/AA EMPLOYER

PART III. EXPERIENCE #14-51

Please follow column headings completely. Attach additional copies of this page if necessary.

List all your work experience as a certified Nursing Assistant. You must include starting month and year and ending month and year as well as the number of hours worked per week. Start with your current and most recent employment.

| DATES & NO. HRS. PER WEEK | IDENTIFY EMPLOYER AND TYPE OF FACILITY |
|---|---|
| | |

PART IV. SPECIALIZED TRAINING AND EDUCATION #14-51

A. CERTIFICATIONS – List below any current certifications you possess related to nursing, geriatrics or any other certification related to your work as a Nursing Assistant. (This could include CPR, AED, First Aid, BLS, medication administration, geriatric nursing assistant, etc.) You must attach copies of the certifications to your application.

B. IN-SERVICE TRAINING – List below all in-service training you have received in the past five years related to nursing, geriatrics, or anything else related to your work as a Nursing Assistant. Attach additional copies of this page if necessary.

| TITLE OF COURSE | SPONSORING ORGANIZATION | DATES & # of HOURS |
|---|---|---|
| | | |

PART IV. SPECIALIZED TRAINING AND EDUCATION (cont.) #14-51

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

1. Associate's Yes____ (Major)_____ No____

2. Bachelor's Yes____ (Major)_____ No____

3. Master's Yes____ (Major)_____ No____

D. COLLEGE COURSES OR CONTINUING EDUCATION - List below all college courses or continuing education courses you have successfully completed in the past five years related to nursing, geriatrics, or anything else related to your work as a Nursing Assistant. Do not include what you listed in Part IV. B. Attach additional copies of this page if necessary.

| TITLE OF COURSE | SPONSORING ORGANIZATION | DATES & # of HOURS or CREDITS |
|---|---|---|
| | | |