



CITY OF STAMFORD

AN 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. 21-59

STAFF ENGINEER

Salary Range: \$94,245 - \$111,317 (Annually)

DUTIES: Under the general direction of the City Engineer or designee, assists in the planning, organizing and directing of professional and non-professional engineering functions including engineering consultation and advice, land surveys, the preparation of contract plans and specifications and the inspection and administration of construction projects; does related work as required.

MINIMUM QUALIFICATION REQUIREMENTS: Graduation from an accredited college or university with a Bachelor's degree in Civil Engineering and four (4) years of professional engineering experience either with a municipality or with a large construction company or consultant.

SCOPE OF EXAMINATION: There will not be a written examination. Qualified applicants will be ranked according to their education, training and experience. Applicants are required to fully complete the application form and supplement, listing all related degrees, training and work experience.

APPLICATION PROCESS: A completed City of Stamford Employment Application and Application Supplement "21-59" must be submitted to hrrecruiting@stamfordct.gov or mailed to 888 Washington Boulevard, Stamford, Connecticut 06904. Position is open until filled. Application and supplement can be obtained at www.stamfordct.gov. **Please note:** Applications of candidates who do not meet the stated position requirements will not be considered. A resume and/or other correspondence will not be considered as equivalent to an 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.

Re-issued: 03/15/22

EMPLOYMENT BENEFITS:

- Health Plan and Hospitalization
- Paid Vacations and Holidays
- Retirement Plan
- Group Life Insurance
- Sick Leave

VETERAN'S PREFERENCE:

Preferential Points may be given to Eligible Veterans. Check with the Department of Human Resources.

Applications are obtained from and submitted to

DEPARTMENT OF HUMAN RESOURCES
CITY OF STAMFORD
888 WASHINGTON BOULEVARD
STAMFORD, CONNECTICUT 06904
TELEPHONE (203) 977-4070
www.stamfordct.gov

General Conditions for Job Announcements and Civil Service Information can be viewed at www.stamfordct.ogov

CHANGE OF ADDRESS:

It is your responsibility to notify the Department of Human Resources of any Change of Address on your application

PERSONNEL COMMISSION

Peter Nanos
Marc Teichman
Carl Weinberg
Beth Adams
Greg Oliver

Mayor
David A. Martin

Director of Legal Affairs
Kathryn Emmet



STAFF ENGINEER
APPLICATION SUPPLEMENT # 21-59
EXPERIENCE AND TRAINING EXAMINATION

NAME _____

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

For this examination, you will be filling out specific information about your education, training and experience. The information that you give will be used to find out how well your background qualifies you for this position. You **MUST** fill out this examination booklet completely in order to take part in this examination. **THIS BOOKLET IS AN EXAMINATION.**

On the pages that follow, you will be asked to supply factual information about your education and training and about the duties, responsibilities and accomplishments that are associated with jobs, which helped you qualify for the position for which you are applying. Your education, training and experience will be scored according to how closely they relate to the various job components or factors of the position of *Staff Engineer*. Your score will be based only on what you include in this examination. Incomplete or illegible applications/supplements will be rejected.

This examination booklet and a completed "Application for Examination or Employment" must be filed with the Human Resources Division by the last filing date noted in the job announcement, or bear a postmark no later than the last filing date. Information submitted after the last filing date will not be considered.

AN EOE/AA EMPLOYER

PART I. SUMMARY OF EDUCATION AND EXPERIENCE #21-59

Please note that applicants who do not meet the minimum qualifications for Staff Engineer will be disqualified. Applicants are urged to carefully review the requirements before filing an application.

A. EDUCATION

Degree: Do you possess a Bachelor's degree in Civil Engineering?

Yes____ Civil Engineering_____ No____

B. EXPERIENCE

1. Do you have at least four (4) years of professional engineering experience either with a municipality or with a large construction company or consultant? Respond and specify number of years below.

	<u>Yes</u>	<u>No</u>	<u>Number of years</u>
<u>Municipality</u>	_____	_____	_____
<u>Large Construction Company</u> <u>Company or Consultant</u>	_____	_____	_____

PART II. EXPERIENCE (cont'd) #21-59

Please follow column headings completely. Attach additional copies of this page if required. Use whatever terms would be most indicative of the level and scope of your work and responsibility.

- A. Describe your professional engineering work experience either with a municipality or large construction company or consultant. If supervisory, so indicate and list number and title(s) of person(s) supervised in the description of duties.

DATES & NO. HRS. PER WEEK	IDENTIFY EMPLOYER AND TITLE OF SUPERVISOR	YOUR JOB TITLE & DUTIES

PART II. EXPERIENCE (cont'd) #21-59

B. Describe your professional engineering work experience other than what you listed in Section A. If supervisory, so indicate and list number of employees supervised and title(s) in description of duties.

DATES & NO. HRS. PER WEEK	IDENTIFY EMPLOYER AND TITLE OF SUPERVISOR	YOUR JOB TITLE & DUTIES

PART III. #21-59

TRAINING: List any training you received in the past five (5) years through institutes, conferences, seminars, workshops or professional associations related to Civil Engineering or engineering in general.

AREA OF STUDY- TITLE OF COURSE	SPONSORING ORGANIZATION	DATES ATTENDED & NO. OF HOURS OR CREDITS

On the following pages are a variety of statements which are related to this position. For each of those statements, circle the letter for the level described below which best reflects your experience, education or training as it relates to that item.

- A - I have applied this Knowledge, Skill or Ability in an actual setting while performing a job.
- B - I have education or training relevant to this Knowledge, Skill or Ability, but have not applied it in an actual job.
- C - I have little or no experience, education or training relevant to this Knowledge, Skill or Ability.

For each A or B answer, give evidence, in detail, in the space provided of how you acquired the Knowledge, Skill or Ability listed. Evidence may be stated in terms of education/training (list courses and schools) or in terms of experience (list your job duties that apply, name of employer, and dates of work).

KNOWLEDGE, SKILLS AND ABILITIES STATEMENT

1. Knowledge of municipal construction and design procedures.

Circle the Appropriate Letter

A B C

Employer/School: _____

Dates: _____

Details: _____

2. Knowledge of the accepted methods of preparing construction plans and specifications including the ability to analyze and interpret the same.

Circle the Appropriate Letter

A B C

Employer/School: _____

Dates: _____

Details: _____

KNOWLEDGE, SKILLS AND ABILITIES STATEMENT

3. Knowledge of the proper function of field survey parties, field notes, records and files.

Circle the Appropriate Letter

A B C

Employer/School

Dates:

Details:

4. Ability to take the leading role in the development of municipal construction projects including interrelating with general contractors, associates, subordinates and others.

Circle the Appropriate Letter

A B C

Employer/School

Dates:

Details:

KNOWLEDGE, SKILLS AND ABILITIES STATEMENT

5. Ability to prepare clear, sound accurate engineering and other reports.

Circle the Appropriate Letter

A B C

Employer/School

Dates:

Details:



APPLICATION FOR EXAMINATION OR EMPLOYMENT

DO NOT WRITE IN THIS SPACE

Q _____

NQ _____

Educ _____ Reviewer

Exp _____

Not City EE _____

Other _____

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

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 <i>(Major/Minor)</i>	GRADUATED <i>(Yes/No)</i>	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
<input type="checkbox"/> Yes <input type="checkbox"/> 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)

- | | |
|---|---|
| <input type="checkbox"/> Stamford Advocate | <input type="checkbox"/> Human Resources Division Bulletin Board |
| <input type="checkbox"/> Other newspaper:
Please give name _____ | <input type="checkbox"/> Community Agency
Please give name _____ |
| <input type="checkbox"/> City Website | <input type="checkbox"/> Professional journal _____ |
| <input type="checkbox"/> Internet
Please give name _____ | <input type="checkbox"/> Other: Please specify _____ |
| <input type="checkbox"/> City Employee | |