



## 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. 20-25

### TRAFFIC ANALYST

Annual Salary Range: \$82,793 - \$106,513

**DUTIES:** Under the general direction of the Bureau Chief of Traffic, Transportation and Parking or designee, performs traffic flow and parking studies; analyzes traffic incident information, accidents, etc.; accumulates traffic data; establishes and maintains records and inventories; performs related field and office work; prepares recommendations to improve traffic flow and safety; examines applications for permits and issues same; responds to public inquiries and complaints; prepares specifications and coordinates the installation, replacement and repair of all pavement markings and traffic control signs.

#### **MINIMUM TRAINING & EXPERIENCE REQUIRED**

Graduation from an accredited college or university with an Associate's degree in Civil Engineering with course work in traffic engineering and four years of increasingly responsible experience in traffic safety and planning; or in lieu thereof, any combination of education and practical traffic engineering experience equal to six years.

#### **SPECIAL REQUIREMENT:**

Possession of a valid Motor Vehicle Operator's License. Must be able to obtain a Work Zone Traffic Control Certification and Level I and Level II Signs and Markings Certification within six months of employment.

**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 "20-25". **POSITION IS OPEN UNTIL FILLED.** Applications can be obtained at the City of Stamford, Human Resources Division, 9<sup>th</sup> Floor, and 888 Washington Boulevard, Stamford, Connecticut or at [www.stamfordct.gov](http://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.

*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: 08/31/2020**

#### **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.stamfordct.gov](http://www.stamfordct.gov)

#### **CHANGE OF ADDRESS**

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

Mayor  
David A. Martin

Director of Legal Affairs  
Kathryn Emmet



**TRAFFIC ANALYST**  
**APPLICATION SUPPLEMENT # 20-25**  
**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 *Traffic Analyst*. 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. REVIEW OF EDUCATION AND EXPERIENCE # 20-25**

Again, you **must** complete this supplement fully and thoroughly. Resumes **will not** serve in lieu of this supplement. However, you may attach a copy of your resume to compliment your application package. Please note that applicants who do not meet the minimum qualifications for *Traffic Analyst* will be disqualified.

**I. EDUCATION:**

Degree: Specify the major field of study for which the degree was conferred.

Associate's	Yes___	(Major) _____	No___
Bachelor's	Yes___	(Major) _____	No___
Master's	Yes___	(Major) _____	No___

**II. EXPERIENCE:**

A. Do you have at least four (4) years of experience in traffic safety and planning? Respond and specify number of years. (Year must be based on a full time equivalent, based on a 35 hours per week position being considered full time. For example, if you worked only 20 hours per week for one year, the number of years of experience would actually be only .57 year.)

Yes\_\_\_ No\_\_\_ Number of Years \_\_\_\_\_

B. Were the above years in a supervisory capacity?

Yes\_\_\_ No\_\_\_ Number of Years \_\_\_\_\_

**PART II.**

**# 20-25**

EXPERIENCE: Please follow column headings completely. Attach additional copies of this page if required. Use whatever terms would best describe the level and scope of your work and responsibility.

Describe your experience in Civil Engineering, Traffic Engineering or Traffic Planning and Safety.

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

**PART III. # 20-25**

- A. SPECIALIZED TRAINING: List all specialized training received within the past five (5) years through institutes, conferences, seminars, workshops or professional associations regarding traffic safety and planning, transportation or other related topics.

SPECIALIZED TRAINING- TITLE OF COURSE	SPONSORING ORGANIZATION	DATES ATTENDED & NO. OF HOURS

**PART III. # 20-25**

Describe your work experience performing analytical duties.

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

**PART IV. KNOWLEDGE, SKILLS AND ABILITIES #20-25**

On the next pages are 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).

**PART IV. #20-25**

**KNOWLEDGE, SKILLS AND ABILITIES STATEMENT (cont'd)**

1. Knowledge of the federal manual on Uniform Traffic Control Devices.

Circle the Appropriate Letter

A                      B                      C

Employer/School

\_\_\_\_\_

\_\_\_\_\_

Dates:

\_\_\_\_\_

Details:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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2. Knowledge and understanding of construction practices, procedures and field survey.

Circle the Appropriate Letter

A                      B                      C

Employer/School

\_\_\_\_\_

\_\_\_\_\_

Dates:

\_\_\_\_\_

Details:

\_\_\_\_\_

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**PART IV. #20-25**

**KNOWLEDGE, SKILLS AND ABILITIES STATEMENT (cont'd)**

3. Ability to utilize computer applications to perform analysis and prepare reports, charts, graphs and related materials.

Circle the Appropriate Letter

A                      B                      C

Employer/School

\_\_\_\_\_

\_\_\_\_\_

Dates:

\_\_\_\_\_

Details:

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4. Ability to apply principles of traffic engineering to solve practical problems, deal with a variety of concrete variables in situations where only limited standardization exists.

Circle the Appropriate Letter

A                      B                      C

Employer/School

\_\_\_\_\_

\_\_\_\_\_

Dates:

\_\_\_\_\_

Details:

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**PART IV. #20-25**

**KNOWLEDGE, SKILLS AND ABILITIES STATEMENT (cont'd)**

5. Ability to interpret a variety of instructions furnished in written, oral, diagrammatic or schematic form.

Circle the Appropriate Letter

A                  B                  C

Employer/School

\_\_\_\_\_

\_\_\_\_\_

Dates:

\_\_\_\_\_

Details:

\_\_\_\_\_

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6. Ability to make complex mathematical computations.

Circle the Appropriate Letter

A                  B                  C

Employer/School

\_\_\_\_\_

\_\_\_\_\_

Dates:

\_\_\_\_\_

Details:

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**PART IV. #20-25**

**KNOWLEDGE, SKILLS AND ABILITIES STATEMENT (cont'd)**

7. Ability to use drafting equipment

Circle the Appropriate Letter

A B C

Employer/School

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Dates:

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Details:

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8. Ability to communicate orally and in writing.

Circle the Appropriate Letter

A B C

Employer/School

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Dates:

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Details:

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**KNOWLEDGE, SKILLS AND ABILITIES STATEMENT (cont'd)**

9. Ability to utilize various programs and applications:

Circle the Appropriate Letter

Microsoft Access	A	B	C
Microsoft Excel	A	B	C
MS Word	A	B	C
MS Outlook	A	B	C
MS PowerPoint	A	B	C
Internet	A	B	C
ADOBE Acrobat	A	B	C
Other (specify program software)			
_____	A	B	C
_____	A	B	C
_____	A	B	C



# APPLICATION FOR EXAMINATION OR EMPLOYMENT

DO NOT WRITE IN THIS SPACE

Q \_\_\_\_\_

NQ \_\_\_\_\_

Educ \_\_\_\_\_ Reviewer

Exp \_\_\_\_\_

Not City EE \_\_\_\_\_

Other \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

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.**

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**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.**

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## 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). \_\_\_\_\_

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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). \_\_\_\_\_

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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). \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

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). \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

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

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## 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:<br>Please give name _____ | <input type="checkbox"/> Community Agency<br>Please give name _____ |
| <input type="checkbox"/> City Website                               | <input type="checkbox"/> Professional journal _____                 |
| <input type="checkbox"/> Internet<br>Please give name _____         | <input type="checkbox"/> Other: Please specify _____                |
| <input type="checkbox"/> City Employee                              |   |