

Application for Employment

(rev. 08/2018)

TOWN OF ORANGE PARK

Applicants may request accommodations to participate in the application process.
Please print in ink. Answer all questions even though a resume is attached.

PERSONAL INFORMATION

Date _____ Social Security No. _____

Name _____

Present Address _____
Last First Middle

Street City State Zip How Long

Previous Address _____

Street City State Zip How Long

Telephone — Home _____ Email _____

If driving is a requirement of the job, do you have a valid driver’s license? Yes No

Are you legally eligible for employment in this Country? Yes No

Are you able, at the time of employment, to submit verification of eligibility if hired? Yes No

Are you related to anyone employed by the Town of Orange Park? Yes No

If yes, state name _____ and location _____

How were you referred to the Town of Orange Park? _____

VETERANS’ PREFERENCE INFORMATION

Pursuant to Florida law, preference-eligible applicants will be given preference in appointment.

Are you claiming veterans’ preference? Yes No If so, please complete the attached Veterans’ Preference Certification. Required documentation must accompany this application, in accordance with Rule 55A-7.013, Florida Administrative Code.

If a non-preference eligible applicant is appointed to the position for which you applied, you may file a written complaint requesting an investigation with the Florida Department of Veterans’ Affairs, Veterans’ Preference Coordinator, 11351 Ulmerton Road, Suite 311, Largo, FL 33778. Such complaint must be filed within 60 calendar days from the date that the notice is received that a preference-eligible applicant was not selected.

EMPLOYMENT DESIRED

Position _____ Date available to begin work _____ Pay desired _____

Have you previously applied for employment with the Town of Orange Park? Yes No

If yes, what position? _____ When? _____

Have you previously been employed by the Town of Orange Park? Yes No

If yes, Job _____ Location _____ Dates _____

EDUCATION

	NAME & LOCATION OF SCHOOL	DEGREE/ DIPLOMA	HIGHEST GRADE COMPLE TED	MAJOR AREA OF STUDY
HIGH SCHOOL		<input type="checkbox"/> Yes		
		<input type="checkbox"/> No		
COLLEGE(S)		<input type="checkbox"/> Yes		
		<input type="checkbox"/> No		
		<input type="checkbox"/> Yes		
		<input type="checkbox"/> No		
GRADUATE SCHOOL		<input type="checkbox"/> Yes		
		<input type="checkbox"/> No		
TRADE OR BUSINESS SCHOOL		<input type="checkbox"/> Yes		
		<input type="checkbox"/> No		

EMPLOYMENT HISTORY

List below your last three employers, giving current or most recent employer first. If currently employed, may we contact your employer? Yes No

From _____ Mo./Yr.	Name of Employer _____ Address _____ _____ City State Zip Telephone _____	Your Job Title _____ Duties _____ _____ Pay: Beginning \$ _____ Ending \$ _____
To _____ Mo./Yr.	Name of Last Supervisor _____ Supervisor's Title _____	Reason for Leaving _____ _____

From _____ Mo./Yr.	Name of Employer _____ Address _____ _____ City State Zip Telephone _____	Your Job Title _____ Duties _____ _____ Pay: Beginning \$ _____ Ending \$ _____
To _____ Mo./Yr.	Name of Last Supervisor _____ Supervisor's Title _____	Reason for Leaving _____ _____

From _____ Mo./Yr.	Name of Employer _____ Address _____ _____ City State Zip Telephone _____	Your Job Title _____ Duties _____ _____ Pay: Beginning \$ _____ Ending \$ _____
To _____ Mo./Yr.	Name of Last Supervisor _____ Supervisor's Title _____	Reason for Leaving _____ _____

Please explain any gaps in your employment history: _____

Have you ever been terminated or asked to resign from any job? Yes No
Has your employment ever been terminated by agreement? Yes No
Have you ever been given the choice to resign rather than be terminated? Yes No
If you answered Yes to any of the above three questions, please explain the circumstances of each occasion. _____

Have you ever been convicted of, or entered a plea of guilty or no contest to, a crime; had charges nolle prossed or had adjudication withheld for a criminal offense; entered a pre-trial intervention program, or been placed on court-ordered probation? * (This is not necessarily a disqualifier.)
 Yes No (If yes, please explain.)

*Note: If you do not understand this question you must ask the Town of Orange Park for clarification.

Have you ever been a defendant or a witness in a civil action in which you were accused of committing an intentional tort(s) (e.g., assault, battery, false imprisonment, intentional infliction of emotional distress), or an unlawful employment practice (e.g., sexual or racial harassment or discrimination)? Yes No If so, provide details, including the date the lawsuit commenced and concluded, the nature of the tort or claim, and the outcome. * (This is not necessarily a disqualifier).

*Note: If you do not understand this question, you must ask the Town of Orange Park for clarification.

MILITARY:

Branch of Service _____

Describe your duties and any special training _____

Rank at Discharge _____

Please set forth any other information you think would be helpful to us in considering you for employment, such as additional work experience, articles/books published, activities, accomplishments, professional licenses or certificates held, etc. (You may exclude all information indicative of age, sex, race, religion, color, national origin, ethnicity, disability, or other protected characteristics.)

Have you ever been employed under any other name? Yes No

If yes, please list: _____

AN EQUAL OPPORTUNITY EMPLOYER

Please read the following statements carefully.

I certify that all of the facts and information contained in the application or any other written documents I have submitted are true and complete, and I understand that any false, incomplete, or misleading information, or any omission of information, is grounds for rejection of this application or, if hired and discovered at any time after I am employed, may result in my dismissal. By submitting this application or other documents, I agree to conform to the policies of the Town of Orange Park and understand that, if hired, my employment and compensation will be for no definite duration and can be terminated, with or without cause, and with or without notice, at any time, at the option of either the Town of Orange Park or me.

I authorize an investigation of my statements and information contained in this application for employment as may be necessary in arriving at any employment decision. All third parties (including individuals, schools, businesses, former employers, law enforcement authorities, governmental agencies and consumer reporting bureaus) are authorized to disclose any and all requested information to this prospective employer, and I agree to release all third parties, as well as the Town of Orange Park and its employees, from any claims arising out of actions taken under these authorizations.

I also authorize the procurement of a consumer report by the Town as part of the preemployment background investigation. If hired, this authorization shall remain on file and shall serve as an ongoing authorization for the Town to procure consumer reports at any time during my employment period.

If accepted for employment, I understand that the Town of Orange Park is a drug-free workplace and the use of illegal drugs is prohibited. I agree to submit to testing in accordance with the Town's Substance Abuse Policy. I understand that any offer of employment is conditional upon satisfactory results of any required drug test and background investigation.

In the event of employment, I agree to comply with all other Town of Orange Park policies, procedures, rules and regulations made known to me at the time of employment or any other times thereafter, and to perform all duties assigned to me to the best of my ability.

Signature: _____ Date: _____

AN EQUAL OPPORTUNITY EMPLOYER
INVESTIGATIVE REPORT DISCLOSURE STATEMENT

By this document, the Town of Orange Park discloses to you that a consumer report, including an investigative consumer report containing information as to your character, general reputation, personal characteristics, and mode of living, may be obtained for employment purposes as part of the pre-employment background investigation and, if hired, at any time during your employment. Should an investigative consumer report be requested, you will have the right to demand a complete and accurate disclosure of the nature and scope of the investigation requested and a written summary of your rights under the Fair Credit Reporting Act. Please sign below to signify receipt of the foregoing disclosure.

Signature of Candidate

Signature of Town Representative

Date

VETERANS' PREFERENCE CERTIFICATION

Date: _____ Name: _____

Section 295.07(1), Florida Statutes, provides for Veterans' Preference in employment appointment and retention, if qualified under one of the following categories and not exempt under Section 295.07(4), Florida Statutes. Section 295.09, Florida Statutes, also provides Veterans' Preference for reinstatement, reemployment, and promotion. If you seek Veterans' Preference, please "check" the appropriate box, and provide this form and documentation of your status along with your employment application, no later than the position advertisement closing date.

I certify that I am qualified to claim Veterans' Preference under the category checked below:

- (a) A disabled veteran:
1. Who has served on active duty in any branch of the United States Armed Forces, has received an honorable discharge, and has established the present existence of a service-connected disability that is compensable under public laws administered by the United States Department of Veterans Affairs; or
 2. Who is receiving compensation, disability retirement benefits, or pension by reason of public laws administered by the United States Department of Veterans Affairs and the United States Department of Defense.
- (b) The spouse of a person who has a total disability, permanent in nature, resulting from a service-connected disability and who, because of this disability, cannot qualify for employment, and the spouse of a person missing in action, captured in line of duty by a hostile force, or forcibly detained or interned in line of duty by a foreign government or power.
- (c) A wartime veteran as defined in s. 1.01(14), who has served at least 1 day during a wartime period. I acknowledge that active duty for training may not be allowed for eligibility under this paragraph.
- (d) The unremarried widow or widower of a veteran who died of a service-connected disability.
- (e) The mother, father, legal guardian, or unremarried widow or widower of a member of the United States Armed Forces who died in the line of duty under combat-related conditions, as verified by the United States Department of Defense.
- (f) A veteran as defined in s. 1.01(14), F.S. I acknowledge that active duty for training may not be allowed for eligibility under this paragraph.
- (g) A current member of any reserve component of the United States Armed Forces or the Florida National Guard. If so, please attach FDVA form VP2, signed by your immediate military supervisor, to document your status.

Please submit this certification with your application, or as soon as possible, prior to the date that the position advertisement closes. **In order to receive Veterans' Preference and to complete your application, this form and documentation to prove your status must be returned to the Human Resources ("HR") office in accordance with Rule 55A-7.013, Florida Administrative Code.** Please contact HR at _____@_____ or _____, if you have any questions.

This statement is true to the best of my knowledge and belief.

By _____

Printed Name _____