



State of Florida

# EMPLOYMENT APPLICATION

Equal Opportunity Employer/Affirmative Action Employer

*The State of Florida does not tolerate violence in the workplace.*

**Where to Find Vacancy Information:**

- On the Internet: <http://jobsdirect.state.fl.us>
- Jobs and Benefits Centers - Consult your local telephone directory
- State Agency Personnel Offices

FOR OFFICIAL USE ONLY			
Agency Authorized Signature	Date	Class Code	Status
POSITION APPLIED FOR			
Agency: _____			
Title: _____			
Position Number: _____		Date Available: _____	
Counties of Interest: _____			
Minimum Acceptable Salary: _____			

GENERAL INSTRUCTIONS
<ul style="list-style-type: none"> <li>• Type or print in ink this application in its entirety.</li> <li>• Specify the position for which you are applying. (Note: A separate application must be submitted for each vacancy. Photocopies are acceptable.)</li> <li>• Submit your application to the office announcing the vacancy no later than the close of business on the announced deadline date.</li> <li>• Sign your name in the Certification Section (page 4). All information you submit is subject to verification.</li> <li>• Notify the agency's hiring authority in advance if you require special disability accommodations to participate in the employment process.</li> </ul>

HOW DO WE CONTACT YOU?
Your Name _____
Social Security Number _____
Your Mailing Address _____
City _____ County _____ State _____ Zip Code _____
Home Phone _____ Business Phone _____ SUNCOM (State Employees) _____
E-mail Address _____

**EDUCATION**

HIGH SCHOOL:	
NAME / LOCATION OF SCHOOL _____	RECEIVED: <input type="checkbox"/> Diploma <input type="checkbox"/> Other (specify) _____ <input type="checkbox"/> None

YOUR NAME, IF DIFFERENT WHILE ATTENDING SCHOOL: \_\_\_\_\_

COLLEGE, UNIVERSITY OR PROFESSIONAL SCHOOL: (TRANSCRIPTS MAY BE REQUIRED)							
NAME OF SCHOOL	LOCATION	DATES OF ATTENDANCE (MONTH / YEAR)		CREDIT HOURS EARNED		MAJOR / MINOR COURSE OF STUDY	TYPE OF DEGREE EARNED
		FROM	TO	QTR	SEM		

YOUR NAME, IF DIFFERENT WHILE ATTENDING SCHOOL: \_\_\_\_\_

JOB-RELATED TRAINING OR COURSE WORK: (VOCATIONAL, TRADE, GOVERNMENTAL, BUSINESS, ARMED FORCES, ETC.)								
NAME OF SCHOOL	LOCATION	DATES OF ATTENDANCE (MONTH/YEAR)		CREDIT HOURS EARNED		COURSE OF STUDY	TRAINING COMPLETED?	
		FROM	TO	CLASS	CLOCK		YES	NO

YOUR NAME, IF DIFFERENT WHILE ATTENDING SCHOOL: \_\_\_\_\_

**LICENSURE, REGISTRATION, CERTIFICATION** EXAMPLES: Driver License, Teacher Certification, RN, LPN, PE, CPA, etc.

LICENSE, REGISTRATION OR CERTIFICATION:	Number	Date Received	Expiration Date	State Licensing Agency

# PERIODS OF EMPLOYMENT

Describe your work experience in detail, beginning with your current or most recent job. Include military service (indicate rank) and job-related volunteer work, if applicable. Indicate number of employees supervised. Use a separate block to describe each position or gap in employment. If needed, attach additional sheets, using the same format as on the application. All information in this section must be completed. Resumes may be attached to provide additional information.

**1**

Name of Present or Last Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No.: (\_\_\_\_) \_\_\_\_\_

Your Job Title: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

FROM:      /      /      TO:      /      /      HOURS PER WEEK:      ( \_\_\_\_\_ )  
MONTH DAY YEAR MONTH DAY YEAR YOUR NAME IF DIFFERENT DURING EMPLOYMENT

Duties and Responsibilities: \_\_\_\_\_

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

Reason For Leaving: \_\_\_\_\_

**2**

Name of Next Previous Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No.: (\_\_\_\_) \_\_\_\_\_

Your Job Title: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

FROM:      /      /      TO:      /      /      HOURS PER WEEK:      ( \_\_\_\_\_ )  
MONTH DAY YEAR MONTH DAY YEAR YOUR NAME IF DIFFERENT DURING EMPLOYMENT

Duties and Responsibilities: \_\_\_\_\_

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

Reason For Leaving: \_\_\_\_\_

**3**

Name of Next Previous Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No.: (\_\_\_\_) \_\_\_\_\_

Your Job Title: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

FROM:      /      /      TO:      /      /      HOURS PER WEEK:      ( \_\_\_\_\_ )  
MONTH DAY YEAR MONTH DAY YEAR YOUR NAME IF DIFFERENT DURING EMPLOYMENT

Duties and Responsibilities: \_\_\_\_\_

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

Reason For Leaving: \_\_\_\_\_

**4**

Name of Next Previous Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No.: (\_\_\_\_) \_\_\_\_\_

Your Job Title: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

FROM: \_\_\_\_/\_\_\_\_/\_\_\_\_ TO: \_\_\_\_/\_\_\_\_/\_\_\_\_ HOURS PER WEEK: \_\_\_\_ (\_\_\_\_)  
MONTH DAY YEAR MONTH DAY YEAR YOUR NAME IF DIFFERENT DURING EMPLOYMENT

Duties and Responsibilities: \_\_\_\_\_

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

Reason For Leaving: \_\_\_\_\_

**5**

Name of Next Previous Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No.: (\_\_\_\_) \_\_\_\_\_

Your Job Title: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

FROM: \_\_\_\_/\_\_\_\_/\_\_\_\_ TO: \_\_\_\_/\_\_\_\_/\_\_\_\_ HOURS PER WEEK: \_\_\_\_ (\_\_\_\_)  
MONTH DAY YEAR MONTH DAY YEAR YOUR NAME IF DIFFERENT DURING EMPLOYMENT

Duties and Responsibilities: \_\_\_\_\_

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

Reason For Leaving: \_\_\_\_\_

**6**

Name of Next Previous Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No.: (\_\_\_\_) \_\_\_\_\_

Your Job Title: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

FROM: \_\_\_\_/\_\_\_\_/\_\_\_\_ TO: \_\_\_\_/\_\_\_\_/\_\_\_\_ HOURS PER WEEK: \_\_\_\_ (\_\_\_\_)  
MONTH DAY YEAR MONTH DAY YEAR YOUR NAME IF DIFFERENT DURING EMPLOYMENT

Duties and Responsibilities: \_\_\_\_\_

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

Reason For Leaving: \_\_\_\_\_

If needed, attach additional sheets, using the same format as on the application. Resumes may be attached to provide additional information.

## KNOWLEDGE / SKILLS / ABILITIES (KSAs)

List KSAs you possess and believe **relevant to the position you seek**, such as operating heavy equipment, computer skills, fluency in language(s), etc.

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## EXEMPTION FROM PUBLIC RECORDS DISCLOSURE

ARE YOU A CURRENT OR FORMER LAW ENFORCEMENT OFFICER, OTHER EMPLOYEE\*\* OR THE SPOUSE OR CHILD OF ONE, WHO IS EXEMPT FROM PUBLIC RECORDS DISCLOSURE UNDER §119.07, F.S.?

YES  NO

\*\*Other covered jobs include: correctional and correctional probation officers, firefighters, certain judges, assistant state attorneys, state attorneys, assistant and statewide prosecutors, personnel of the Department of Revenue or local governments whose responsibilities include revenue collection and enforcement or child support enforcement, and certain investigators in the Department of Children and Families [see §119.07, F.S.].

## BACKGROUND INFORMATION

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR A FIRST DEGREE MISDEMEANOR?

YES  NO

If "YES", what charges? \_\_\_\_\_

Where convicted? \_\_\_\_\_

Date of Conviction: \_\_\_\_\_

HAVE YOU EVER PLED NOLO CONTENDERE OR PLED GUILTY TO A CRIME WHICH IS A FELONY OR A FIRST DEGREE MISDEMEANOR?

YES  NO

If "YES", what charges? \_\_\_\_\_

Where? \_\_\_\_\_

Date: \_\_\_\_\_

HAVE YOU EVER HAD THE ADJUDICATION OF GUILT WITHHELD FOR A CRIME WHICH IS A FELONY OR A FIRST DEGREE MISDEMEANOR?

YES  NO

If "YES", what charges? \_\_\_\_\_

Where? \_\_\_\_\_

Date: \_\_\_\_\_

**NOTE:** A "YES" answer to these questions will not automatically bar you from employment. The nature, job-relatedness, severity and date of the offense in relation to the position for which you are applying are considered.

## CITIZENSHIP

The State of Florida hires only U.S. citizens and lawfully authorized alien workers. If a conditional offer of employment is made, you will be required to provide identification and proof of citizenship or authorization to work in the U.S.

ARE YOU A U.S. CITIZEN OR ARE YOU LEGALLY AUTHORIZED TO WORK IN THE U.S.?

YES  NO

## RELATIVES

TO YOUR KNOWLEDGE, DO YOU HAVE ANY RELATIVES WORKING IN THIS AGENCY?

YES  NO

## SELECTIVE SERVICE SYSTEM REGISTRATION

All males between the ages of 18 and 26 must be registered with the Selective Service System or exempted.

IF YOU ARE A MALE BETWEEN THE AGES OF 18 AND 26, DO YOU HAVE PROOF OF REGISTRATION WITH THE SELECTIVE SERVICE SYSTEM OR EXEMPTION FROM SUCH REGISTRATION?

YES  NO

## CERTIFICATION

I am aware that any **omissions, falsifications, misstatements, or misrepresentations above** may disqualify me for employment consideration and, if I am hired, may be grounds for termination at a later date. I understand that any information I give may be investigated as allowed by law. I consent to the release of information about my ability, employment history, and fitness for employment by employers, schools, law enforcement agencies, and other individuals and organizations to investigators, personnel staff, and other authorized employees of Florida state government for employment purposes. This consent shall continue to be effective during my employment if I am hired. I understand that applications submitted for state employment are public records except as exempted above. I certify that to the best of my knowledge and belief all of the statements contained herein and on any attachments are **true, correct, complete, and made in good faith.**

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

Employer, remove this section upon completion of the selection process.

YOUR NAME: \_\_\_\_\_

POSITION TITLE FOR WHICH YOU ARE APPLYING: \_\_\_\_\_ POSITION NUMBER: \_\_\_\_\_

### VETERANS' PREFERENCE INFORMATION

Completion of the Veterans' Preference section below is made on a voluntary basis and kept confidential in accordance with the Americans with Disabilities Act. Listed below are the four Veterans' Preference categories.

1. A veteran with a service-connected disability who is eligible for or receiving compensation, disability retirement, or pension under public laws administered by the U.S. Department of Veterans' Affairs and the Department of Defense, **or**
2. The spouse of a veteran who cannot qualify for employment because of a total and permanent disability, or the spouse of a veteran missing in action, captured, or forcibly detained by a foreign power, **or**
3. A veteran of any war who has served on active duty for one day or more during a wartime period, excluding active duty for training, and who was discharged under honorable conditions from the Armed Forces of the United States of America, **or**
4. The unremarried widow or widower of a veteran who died of a service-connected disability.

A **DD214** or comparable document which serves as a certificate of release or discharge **must be furnished at the time of application**. In addition, applicants claiming categories 1, 2, or 4 above must furnish supporting documentation in accordance with the provisions of Rule 55A-7.013, F.A.C. Wartime periods are defined in §1.01, F.S. Veterans' Preference shall expire after an eligible person has been employed by the state or an agency of a political subdivision of the state. Under Florida law, preference in appointment shall be given by the state to those persons in categories 1 and 2 and then those in categories 3 and 4. Veterans' Preference is only available to Florida residents.

If an applicant claiming Veterans' Preference for a vacant position is not selected, he/she may file a complaint with the Florida Department of Veterans' Affairs, P.O. Box 31003, St. Petersburg, Florida 33731-8903. A complaint must be filed within 21 days of the applicant receiving notice of the hiring decision made by the employing agency or within 3 months of the date the application is filed with the employer if no notice is given.

### VETERANS' PREFERENCE CLAIM

IF ELIGIBLE, WHICH VETERANS' PREFERENCE CATEGORY ARE YOU CLAIMING?  
(Please indicate number from Veterans' Preference Information section above.)

HAVE YOU EVER BEEN EMPLOYED BY ANY GOVERNMENTAL ENTITY WITHIN THE STATE OF FLORIDA?

YES

NO

ARE YOU A RESIDENT OF THE STATE OF FLORIDA?

YES

NO

**NOTE:** If you are claiming Veterans' Preference you **must** meet the criteria and substantiate your claim by furnishing a DD 214 (Certificate of Release or Discharge from Active Duty) and any other required supporting documentation with your application.

Employer, remove this section prior to the selection process.

### EEO SURVEY

Although the following information is not mandatory, it is requested to aid the State of Florida in its commitment to Equal Employment Opportunity and Affirmative Action. Refusal to answer will not result in adverse treatment of any applicant. Applicants who believe they have been discriminated against may file a complaint with the Florida Commission on Human Relations, Building F, Suite 240, 325 John Knox Road, Tallahassee, Florida 32303.

POSITION TITLE FOR WHICH YOU ARE APPLYING: \_\_\_\_\_

POSITION NUMBER: \_\_\_\_\_

SEX:  MALE  FEMALE

DATE OF BIRTH: \_\_\_\_\_

RACE (Check Only One):

WHITE (Non-Hispanic)  BLACK (Non-Hispanic)  HISPANIC  ASIAN or PACIFIC ISLANDER  NATIVE AMERICAN

OTHER (Specify) \_\_\_\_\_

# Employment with the State of Florida

The State is a major employer in Florida offering many challenging and rewarding career opportunities. Included among the many advantages of working for the State are the diverse and interesting job opportunities as well as competitive salaries, benefits, and career mobility.



Most state jobs are in the **Career Service** personnel system. The Career Service system provides uniform pay, job classification, benefits, and recruitment for the majority of non-management jobs within state agencies. Career Service employees can move between agencies without any loss of state benefits.

**Non-Career Service jobs** include upper management and policy-making jobs in the Senior Management Service (SMS), middle management and professional positions such as physicians, attorneys, bureau chiefs in the Selected Exempt Service (SES), and temporary jobs funded by Other Personal Services (OPS). OPS employees receive an hourly wage but no benefits such as insurance, leave, or retirement.

**Non-Career Service agencies** are agencies in which all positions are not a part of the Career Service system and their employment procedures may differ. For example, in most cases, they may require different applications and their job titles and salaries may not be comparable to the Career Service system.

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## EMPLOYMENT PROCESS

Individual state agencies are responsible for announcing their job vacancies, accepting

applications, and making hiring decisions. Generally, agencies accept job applications for **advertised vacancies** only. In some instances, however, agencies may accept applications on a continuous basis to meet Affirmative Action goals and for hard-to-fill vacancies. You may obtain applications from any

Career Service agency personnel office or any Florida Jobs and Benefits Center (formerly Job Service of Florida). A legible original or photocopy of the State of Florida employment application is normally required for each job vacancy for which you apply. It is also possible to obtain an application form and to apply electronically via the Internet for many vacancies at:

<http://jobsdirect.state.fl.us>

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## LOCATING VACANT POSITIONS

There are several ways for you to obtain state job vacancy information:

- Vacancy information is available on the Internet at: <http://jobsdirect.state.fl.us>.
- Contact individual Career Service agencies directly for information regarding their employment opportunities.
- Contact a Florida Jobs and Benefits Center for job vacancy information for all Career Service agencies, including jobs in the Selected Exempt and Senior Management Services. Check your telephone directory under "Florida Jobs and Benefits Center" or "Job Service of Florida" to locate the office nearest you.

Since agencies are not required to advertise **OPS** temporary jobs, you may wish to contact any of the state agencies for **OPS** employment consideration.

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## JOB SEARCH TIPS

Market yourself. Prior to completing the application, gather specific information relating to the position you seek by reviewing the job opportunity announcement or by contacting the employing agency for a description of duties and relevant knowledge, skills, and abilities. Use this information to assist you in preparing your application, cover letters, resumes and other support materials.

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## COMPETING IN THE SELECTION PROCESS

The first step an employing agency takes in the selection process is to review the applications which have been received to determine who is eligible to compete further in the selection process. The agency then uses job-related criteria to determine those applicants who will be asked to participate in additional assessment steps such as an oral interview, a work sample exercise, or a proficiency test. The job-related information gained during the selection process will assist the hiring official in making the final selection decision. Veterans' preference and Affirmative Action goals are also considered by the agency in the decision-making process.

If, because of a disability, you require a special accommodation to participate in the application and selection process, please notify the hiring authority in advance.

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