

**AN EQUAL OPPORTUNITY EMPLOYER  
Application for Employment**

(rev. 10/2010)

**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 \_\_\_\_\_

Last First Middle

Present Address \_\_\_\_\_

Street City State Zip How Long

Previous Address \_\_\_\_\_

Street City State Zip How Long

Telephone — Home \_\_\_\_\_ Business \_\_\_\_\_

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? \_\_\_\_\_

**VETERAN PREFERENCE**

Pursuant to Florida law certain veterans and their spouses will receive preference in appointment and/or employment. The following questions are designed to assist the Town of Orange Park in discharging its legal duty. You are not required to answer any of the following questions; however, if you or your spouse is covered by the veterans preference law the Town of Orange Park requests that you complete the following questions in order to permit the Town to comply with any legal obligation:

1) Are you a disabled veteran who has served on active duty in any branch of the Armed Forces of the United States and who has received an honorable discharge, and who presently has a service-connected disability which is compensable under public laws administered by the United States Department of Veterans Affairs?  Yes  No

2) Are you a disabled veteran who is receiving compensation, disability retirement benefits, or pension benefits by reason of public laws administered by the United States Department of Veterans Affairs and the Department of Defense?  Yes  No

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3) Are you the spouse of any 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, or are you otherwise the spouse of any person missing in action, captured in the line of duty, or forcibly detained or interned in the line of duty by a foreign government or power?  Yes  No

4) Are you a veteran of any war?  Yes  No

5) Are you the unmarried widow or widower of a veteran who died of a service-connected disability?  Yes  No

**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 COMPLET ED	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		

## AN EQUAL OPPORTUNITY EMPLOYER

### 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: \_\_\_\_\_

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Have you ever been convicted of, or pled guilty or no contest to, a crime; had an 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.)

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

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Have you ever been sued for an intentional tort (such as, but not limited to, assault, battery, or false imprisonment)? 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).  Yes  No

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

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**MILITARY:**

Branch of Service \_\_\_\_\_ Period of Active Duty \_\_\_\_\_ to \_\_\_\_\_

Describe your duties and any special training \_\_\_\_\_

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Rank at Discharge \_\_\_\_\_ Date of Final Discharge \_\_\_\_\_

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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.)

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

If yes, please list: \_\_\_\_\_

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**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 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: \_\_\_\_\_

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**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 hire, 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