APPLICATION FOR EMPLOYMENT

WASHINGTON COUNTY BOARD OF COUNTY COMMISSIONERS

1331 SOUTH BLVD., CHIPLEY, FL 32428

*After completion, please return to the Human Resources Department.

Phone: 850-415-5151 Fax: 850-415-5152

http://www.washingtonfl.com/humanresources/hr.htm

An Equal Opportunity Employer / A Drug-Free Workplace

**We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital, or veteran status, the presence of non-job-related medical condition or handicap, or any other legally protected status.

(PLEASE PRINT OR TYPE) Date of Application:	Please NOTE: Although we welcome your resume as an					
Position for which applying:	addendum, your resume will not substitute					
Department:	for completion of this application. To be eligible for consideration, please fill out all					
Referral Source:	sections of the application.					
	mployment Agency					
Name:						
(Last) (First) (Middle)						
Mailing Address:						
Phone Number: Alt. Phone Number	rate, Zip) r:					
E-Mail Address:						
Social Security Number: Are you at least 18 years of age: \bigsize \text{No} \text{ No}						
Driver's License No: State: Cla	ass: Endorsement(s):					
Are you legally authorized to work in the United States? Yes	No					
Have you ever worked for Washington County? Yes* No * If yes, indicate the department, position, and reason for leaving						
Have you carefully read the job requirements?						
Can you perform all the essential functions of the job for which you are applying, with or without a reasonable accommodation? Yes No*						
On what date would you be available to work?						
Are you available to work? Full-time Part-time Shift Work Temporary Can you travel if a job requires it? Yes No						
PUBLIC RECORD DISCLOSURE						
I understand that applications and included attachments submitted for County employment are public records.						

CHILD OF ONE, WHO IS EX		RCEMENT OFFICER, OTHER EMPLOYEE** OR THE SPOUSE (RECORDS DISCLOSURE UNDER §119.07(3)(k)1,F.S.?	OR		
☐ YES ☐ NO					
List qualifying exemption:	correctional and correc	 ctional probation officers, firefighters, certain judges, assistant sta	ıto.		
-		rosecutors, and certain investigators in the Department of Childre			
and Families [SEE §119.07(3	·	σ. σ			
municipal law, regulation or o violations; had an adjudication been placed on court-ordered	rdinance, including felor n withheld for a criminal I probation? *If you do r	ntest and/or pled guilty to any violation of any federal, state, countries, misdemeanors, and traffic violations other than non-moving all offense; entered a pre-trial intervention or diversion program, or not understand this question, you must ask for clarification.	١		
Yes** No (This is in the state of the state		alifier). date of offense, court, type of crime, and disposition.			
	an, mordaing the state, c				
		EDUCATION			
*Note: A copy of the certificate certificate, etc.	tes listed below MUST b	be provided with application. Examples: High school diploma, G	iED		
<u>SCHOOL</u>		<u>GRADES</u>			
ELEMENTARY		(Check highest level completed)	evel completed)		
		5 6 7 8			
HIGH SCHOOL		(Check highest level completed)			
		9 10 11 12 – Did you graduate? 🗖 Yes 🕻	1		
No					
List below names of colleges,	business, or trade or vo	ocational schools:			
SCHOOL	<u>MAJOR</u>	<u>Did you graduate?</u> <u>DATE</u>			
		Yes			
		Yes			
		Yes			
Describe specialized training,	apprenticeship, skills a	and extra-curricular activities:			
VETERANS' PREFERENCE	CL AIM				
Do you wish to claim Veteran	_	s 🔲 No			
If eligible, which Veterans' Pre					
(Please indicate number from	Veterans' Preference in	information sheet – see last page of application.)			
		ervice (from – to):			

discharge **must be furnished at the time of application.** In addition, applicants claiming categories 1, 2, 3, or 5 must

A DD-214 or comparable document indicating the character of service which serves as a certificate of release or

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.

PREVIOUS EMPLOYERS

Start with your present or last job. Include military service assignments and volunteer activities. If you need additional space, please continue on a separate sheet of paper. <u>Please remember that resumes are not a substitute for the completion of this information.</u>

1.)	Employer: Phone number:		
	Address:		
	Job Title:	Dates Employed:	
	Work Performed:		
	Supervisor:	Reason for Leaving:	
	Hourly Salary (Starting) \$	(Ending) \$	
2.)	Employer:	Phone number:	
	Address:		
	Job Title:	Dates Employed:	
	Work Performed:		
	Supervisor:	Reason for Leaving:	
	Hourly Salary (Starting) \$	(Ending) \$	
3.)	Employer:	Phone number:	
	Address:		
	Job Title:	Dates Employed:	
	Work Performed:		
	Supervisor:	Reason for Leaving:	
	Hourly Salary (Starting) \$	(Ending) \$	
4.)	Employer:	Phone number:	
	Address:		
	Job Title:	Dates Employed:	
	Work Performed:		
	Supervisor:	Reason for Leaving:	
	Hourly Salary (Starting) \$	(Ending) \$	

Have you ever been terminated or asked to resign from employment? ☐ Yes ☐ No If yes, please explain:					
Special skills, qualifications, certificates, or licenses or endorsements: List professional, trade, business or civic activities and office held. You may exclude organization names which indicate race, color, religion, gender, national origin, handicap or other protected status.					
than can give a reference NAME	and telephone numbers of three regarding your character, integrit CONTACT INFOR				
2.)					
		CERTIFICATION			
I understand that applicat are true and correct to the	ions submitted for County employ	read carefully Imment are public records. I certify that the answers given herein			
	byment shall be considered active on packet and understand the app	for a period of time not to exceed six months. I have read plication process.			
the right to employment Washington County. I u	or for my later dismissal. I agr inderstand that this document, r	presentation, or omission of facts, may be cause for denying me ee, if hired, to abide by all policies, rules, and regulations of for any offer of employment from the employer, constitute an fect is executed by the employer and the employee in writing.			
necessary in arriving at a provide notice to me regathird parties are authorized release Washington Courauthorizations. By signing on Internet and social me	ny employment decision. To the earding reports or records given or ad to disclose any and all information and all persons or organization below, I also agree to allow the dia websites and to allow such in	on contained in this application for employment as may be extent permitted by law, I waive any legal requirements to received in accordance with this authorization. Accordingly, all ion to the County as a prospective employer and I hereby as from any liability arising from any actions taken under these County to conduct checks of all information that is discoverable formation to influence both interviewing and hiring decisions for for the position indicated, and I must reapply for future			
		part of my application for employment. I understand that either t for illegal drugs will disqualify me from further consideration for			
I have read in full and und	derstand the above statements ar	nd conditions of employment.			
Applicant's Signature		 Date			

EEO SURVEY

Applicants are considered for all positions, and all employees are treated equally during employment without regard to race, color, religion, gender, national origin, handicap or other legally protected status.

Although the following information it not mandatory, it is requested to assist the County in its commitment to Equal Employment Opportunities.

This data is for periodic government reporting and will be kept in a sep	parate file.	
Date of Application:	_	
Position for which applying:		
Department:	_	
Referral Source: Advertisement Friend Relative Walk-In	Employment Agency	Other:
Check One: Gender ☐ Male ☐ Fem		
☐ Male ☐ Fem		
		Asian/Pacific Islander

STATUS OF PREFERENCE

- 1) Honorably discharged disabled Veteran who has a service connected, compensable disability.
- 2) The spouse of a totally disabled Veteran, who because of this disability cannot qualify for employment.
- 3) The spouse of any person missing in action, captured in the line of duty, or forcibly detained.
- 4) A Veteran of any war who served during a wartime era. "Wartime era" includes:
 - a) World War II: December 7, 1941 to December 31, 1946;
 - b) Korean Conflict: June 27, 1950 to January 31, 1955;
 - c) Vietnam Era: February 28, 1961 to May 7, 1975;
 - d) Persian Gulf War: August 2, 1990 to January 1, 1992;
 - e) Korean Conflict: June 27, 1950 to January 31, 1955;
 - f) Vietnam Era: February 28, 1961 to May 7, 1975;
 - g) Persian Gulf War: August 2, 1990 to January 2, 1992.
 - h) Operation Enduring Freedom: October 7, 2001 to date to be determined.
 - i) Operation Iraqi Freedom: March 19, 2003 to date to be determined.
 - j) U.S. Combat Campaigns and Expeditions as listed in Chapter 2003-42, Laws of Florida. For a complete listing please look under the Veterans' tab on the Human Resources website. http://www.washingtonfl.com/humanresources/status_of_preference.htm
- 5) The un-remarried widow or widower of a Veteran who died of a service connected disability;
- 6) A Veteran of U.S. Combat Campaigns or Expeditions that qualify for preference as defined by law (possesses Armed Forces Expeditionary Medal AFEM).

Should you qualify for the preference under any category and wish to assert it, please state the status of your preference (one of the above listed categories) on the application for employment in the military section. Documentation (DD214 or comparable documentation substantiating your claim) MUST BE FURNISHED AT THE TIME OF APPLICATION TO BE ELIGIBLE. Please mail, fax, or bring in the documentation immediately after submitting your application for employment. If claiming preference due to disability, a letter that is less than one year old from the Veteran's Administration stating disability percentage must be submitted in addition to the DD214.

If an applicant claiming Veterans' Preference is not selected, he/she may file a complaint with the Florida Department of Veterans' Affairs, 11351 Ulmerton Road, Suite 311-K, Largo, Florida 33778-1630. A complaint must be filed within 21 days of the applicant receiving notice of the hiring decision or with 3 months of the date the application is filed if no notice is given.

FOR ADDITIONAL INFORMATION ON VETERANS' PREFERENCE, THE FOLLOWING LINK IS PROVIDED AS A PUBLIC SERVICE: http://www.floridavets.org/benefits/veteranspref.asp

The Washington county Board of County Commissioners also provides assistance to Veterans through their Veterans' Service Office. Contact, Chris Hyatt, VSO at 850-638-6140, for further information.