

EDUCATIONAL DATA:

SCHOOL	Print Name, Address, City, State & Zip	Years Completed	Course Type/ Major Degree/Certificate
High School			
College			
Trade, Business, or Correspondence			
Other			

GENERAL INFORMATION

If hired, are you able to provide us with proof of identification and employment eligibility? Yes No

Have you ever been **CONVICTED** of a criminal offense? Yes No Date: _____

Place: _____ Nature: _____

(NOTE: A yes answer will not automatically disqualify you from being considered as a candidate for employment.)

Have you previously applied for employment with the City? Yes No If yes, when? _____

Have you previously been employed by the City? Yes No If yes, when? _____
In what position(s)? _____

Do you have relatives employed here? Yes No If yes, please list name(s) department(s) and relationship(s): _____

Person to be notified in case of emergency:

Name: _____ Telephone: _____

Address: _____ Relationship: _____

REFERENCES

Please list at least (3) three personal references, omitting former employers and relatives.

Name	Address	Occupation	Telephone

EMPLOYMENT HISTORY - List all employers

Please list all previous employers beginning with the present or most recent employer first (use additional sheet of paper if necessary).

<i>EMPLOYED</i> <i>FROM:</i> _____ <i>TO:</i> _____	<i>Job Title</i>	<i>Employer Name, Address, Telephone:</i> _____ _____
	<i>Supervisors Name/Title:</i>	

<i>YOUR SALARY</i>		<i>Duties:</i>
<i>START</i>	<i>END</i>	

Reason for Leaving: _____ **May we contact? ___ Yes ___ No**

<i>EMPLOYED</i> <i>FROM:</i> _____ <i>TO:</i> _____	<i>Job Title</i>	<i>Employer Name, Address, Telephone:</i> _____ _____
	<i>Supervisors Name/Title:</i>	

<i>YOUR SALARY</i>		<i>Duties:</i>
<i>START</i>	<i>END</i>	

Reason for Leaving: _____ **May we contact? ___ Yes ___ No**

<i>EMPLOYED</i> <i>FROM:</i> _____ <i>TO:</i> _____	<i>Job Title</i>	<i>Employer Name, Address, Telephone:</i> _____ _____
	<i>Supervisors Name/Title:</i>	

<i>YOUR SALARY</i>		<i>Duties:</i>
<i>START</i>	<i>END</i>	

Reason for Leaving: _____ **May we contact? ___ Yes ___ No**

<i>EMPLOYED</i> <i>FROM:</i> _____ <i>TO:</i> _____	<i>Job Title</i>	<i>Employer Name, Address, Telephone:</i> _____ _____
	<i>Supervisors Name/Title:</i>	

<i>YOUR SALARY</i>		<i>Duties:</i>
<i>START</i>	<i>END</i>	

Reason for Leaving: _____ **May we contact? ___ Yes ___ No**

MILITARY EXPERIENCE:

Were you in U.S. Armed Forces? Yes No Branch: _____

Dates of duty: From : _____ To: _____ Rank at Separation _____ Briefly describe your duties: _____

Are you a member of the National Guard or a Reserve Unit? Yes No Status: _____

Are you claiming Veterans Preference ? Yes No

If you are claiming Veteran's Preference you must provided the following with your application:

1. Veterans, disabled veterans, and spouses of disabled veterans shall furnish a **DD-214**, or military discharge papers or equivalent certificate from the Veterans Administration, listing military status, dates of service and discharge type.
2. Disabled veterans shall also furnish a document from the Department of Defense, Veterans Administration or the Division, certifying that the veteran has a service connected disability.

You must not have been given a job utilizing a veterans preference claim since 1987.

NOTE: The fact that you have served in the military does not automatically entitle you to Veteran's Preference. Florida Department of Veterans Affairs, Division of Veterans Benefits and Assistance, Chapter 55A-7, reads as follows:

A veteran of any war, as defined in Section 55A-7.003(11) of this chapter, who has served on active duty for 181 consecutive days or more, or who has served 180 consecutive days or more since January 31, 1955, and who was discharged or separated therefrom with an honorable discharge from the Armed Forces of the United States of America if any part of such active duty was performed during the wartime era. However, active duty for training shall not be allowable.

Please include 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, etc. (You may exclude all information indicative of age, sex, race, religion, color, national origin or handicap.)

AGREEMENT

I CERTIFY THAT ANSWERS GIVEN HEREIN ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION FOR EMPLOYMENT AS MAY BE NECESSARY IN ARRIVING AT AN EMPLOYMENT DECISION.

IN THE EVENT OF EMPLOYMENT, I UNDERSTAND THAT FALSE OR MISLEADING INFORMATION GIVEN IN MY APPLICATION OR INTERVIEW(S) MAY RESULT IN DISCHARGE. I UNDERSTAND, ALSO, THAT I AM REQUIRED TO ABIDE BY ALL RULES, REGULATIONS, AND POLICIES OF THE CITY OF KEY WEST.

I HAVE READ AND SIGNED THE JOB DESCRIPTION FOR THE POSITION IN QUESTION. I UNDERSTAND AND AGREE THAT THE JOB DESCRIPTION MAY BE AMENDED FROM TIME TO TIME. THERE IS NOTHING TO KEEP ME FROM FULFILLING THE DUTIES AS LISTED.

SIGNATURE OF APPLICANT

DATE