

EMPLOYMENT APPLICATION

CITY OF JACKSONVILLE, FLORIDA

SUITE 100 - CITY HALL – ST. JAMES BLDG., - 117 WEST DUVAL STREET – JACKSONVILLE, FL 32202-3701

POSITION APPLIED FOR							SALARY REQUIREMENT			
POST NO.		LAST				FIRST			MI	
ADDRESS						SSN				
CITY		STATE		ZIP		HM #		WK #		
EMAIL				<i>Have you ever been employed by the City of Jacksonville? Yes No . If yes, please provide the employment dates and department.</i>			<i>Have you ever been convicted of or are you awaiting trial disposition on a Felony, Misdemeanor, or Municipal Offense? Yes No . If yes, explain the nature and date of the offense:</i>			
<i>Are you authorized to work in the US? Yes No</i>										

VETERAN INFORMATION											
<i>Eligible veterans and spouses of eligible veterans may receive preference in employment. A DD-214 or its equivalent must be submitted to support this preference. Are you claiming veteran's preference? Yes No</i>						<i>Have you ever had a license, permit or privilege to operate a motor vehicle denied, revoked or suspended? Yes No</i>					

EDUCATION: MARK HIGHEST GRADE COMPLETD:	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
<i>If GED completed, identify the date and name of issuing authority (i.e.:USAF1, Name of State, etc.)</i>																

				GRADUATE SCHOOL YEARS:				1		2		3		4	
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College/University/Vocation Institution	Did you graduate?	Submit a transcript with this application. Major/Minor	Degree Type	Dates

SKILL	PROFICIENCY			LICENSE/CERTIFICATES	Schedule Sought:	Work Availability
	Indicate	L Low	M Medium			
Building Maintenance				AC/HVAC	Full time	Immediately
Collections				Code Enforcement	Part time	2 weeks
Customer Service				Refrigerant Recovery	Summer	2-4 weeks
Data Entry				Professional Engineer	Temporary	Other:
PC Spreadsheet				Building Plans Examiner	Work Shifts:	Work Location Preference:
Electronics				Plumber		
PC Literacy				Electrician		
Project Management				First Responder		
Presentation Skills				Driver's License Class A	Day	Arlington/Beaches Downtown/San Marco Mandarin Northside Southside Westside All Locations
Report Writing				Driver's License Class B	Night	
Team Building				Driver's License Class C	Split	
Typing				Driver's License Class D	Holidays	
Word Processing				Driver's License Class E	Overtime	
Other				Driver's License Endorsement	Rotating shifts	
				Other	Weekends	
					All Shifts	

CERTIFICATION STATEMENT: I hereby certify that all the facts and information listed on this employment application are true and complete. I understand that any false, incomplete or misleading information is sufficient cause to either reject my application or to dismiss me from employment when discovered. Any offer of employment is contingent upon my passing a pre-employment physical, drug and/or background investigation. I further understand that as a condition of employment, I may be required to submit to random drug and alcohol tests. My failure to submit to an authorized test or an unsatisfactory result from an authorized test will disqualify me from employment and if the City employs me, may result in my immediate dismissal. **I CERTIFY THAT I HAVE READ, UNDERSTAND, AND AGREE WITH THIS EMPLOYMENT CERTIFICATION STATEMENT.**

DATE: _____	Signature: _____
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EMPLOYMENT EXPERIENCE:

May we contact your present employer? Yes No Start with current job and list at least ten years' work history. Use Employment Application-Supplemental Sheets if needed.

Name and Address:	Date Employed Mo/Yr.)	
	From	To
	Salary	
Reason for Leaving:	Start	End
Job Title and Duties:		

Name and Address:	Date Employed Mo/Yr.)	
	From	To
	Salary	
Reason for Leaving:	Start	End
Job Title and Duties:		

Name and Address:	Date Employed Mo/Yr.)	
	From	To
	Salary	
Reason for Leaving:	Start	End
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Name and Address:	Date Employed Mo/Yr.)	
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