

BOARD OF SUMTER COUNTY COMMISSIONERS EMPLOYMENT APPLICATION

We are an Equal Opportunity Employer. We do not discriminate on the basis of race, religion, color, sex, age, national origin, marital status, or disability. * Completed applications may be returned to the Board of Sumter County Commissioners at 209 North Florida Street, Bushnell, Florida 33513. Your application will be kept on file for two (2) years.

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

APPLICANT INFORMATION (Please type or print in ink):

(Last Name)	(First Name)
- - - -	(M.I.)
(Driver's License Number)	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E (regular) (Driver's License Type) (note: A/B/C are CDL classes)
() -	() -
(Home Telephone)	(Business Telephone)

MAILING ADDRESS: _____
 (Number – Apartment, Street, or R.F.D.)

 (City) (State) (Zip Code)

How did you learn of this job opening? Newspaper Job Board Job Line Internet
 Other, please specify: _____

EDUCATION:

HIGH SCHOOL		
Name/Address of School	Received	Date Rec'd
	<input type="checkbox"/> Diploma <input type="checkbox"/> Certificate of Completion <input type="checkbox"/> GED <input type="checkbox"/> Other _____ <input type="checkbox"/> None, highest grade completed _____	

YOUR NAME WHILE ATTENDING SCHOOL IF DIFFERENT FROM THE APPLICATION: _____

COLLEGE, UNIVERSITY, OR PROFESSIONAL SCHOOL (TRANSCRIPTS MAY BE REQUIRED):							
Name of School	Location	Date of Attendance (Month/Yr)		Credit Hours Earned		Major/Minor Course of Study	Type of Degree Earned
		FROM	TO	QTR	SEM		

YOUR NAME WHILE ATTENDING SCHOOL IF DIFFERENT FROM THE APPLICATION: _____

BUSINESS, CORRESPONDENCE, TRADE, TECHNICAL, OR VOCATIONAL SCHOOL:							
Name of School	Location	Date of Attendance (Month/Yr)		Credit Hours Earned		Major/Minor Course of Study	Type of Degree Earned
		FROM	TO	Class	Clock		

YOUR NAME WHILE ATTENDING SCHOOL IF DIFFERENT FROM THE APPLICATION: _____

LICENSURE, REGISTRATION, CERTIFICATION

EXAMPLES INCLUDE: Teacher's, RN, LPN, PE, CPA, etc.

License, Registration or Certification Number	Date Rec'd	Exp. Date

SKILLS

List other skills you possess and believe Relevant to the position you seek, such As typing speed, computer skills, fluency In language(s) other than English, etc.

EXPERIENCE

Describe your work experience in detail, beginning with your current or most recent job. Use a separate block to describe each position. Include military service (indicate rank) and volunteer work, if applicable. Indicate number of employees supervised. Provide an explanation of any gaps in employment. If needed, attach additional sheets, using the same format as on the application. Resumes are acceptable for the description of duties and responsibilities. All other information in this section must be completed.

1 Name of Present or Last Employer: _____

Address: _____

Your Job Title: _____

FROM: _____ HOURS PER WEEK: _____
 MONTH DAY YEAR

TO: _____ ANNUAL SALARY _____
 MONTH DAY YEAR STARTING ENDING

Supervisor's Name: _____ Title: _____

May we contact your employer? Yes No Phone No. _____

Your name while employed in this job if different from application: _____

Duties and Responsibilities: _____

Reason(s) for Leaving: _____

2 Name of Next Previous Employer: _____

Address: _____

Your Job Title: _____

FROM: _____ HOURS PER WEEK: _____
 MONTH DAY YEAR

TO: _____ ANNUAL SALARY _____
 MONTH DAY YEAR STARTING ENDING

Supervisor's Name: _____ Title: _____

May we contact your employer? Yes No Phone No. _____

Your name while employed in this job if different from application: _____

Duties and Responsibilities: _____

Reason(s) for Leaving: _____

3 Name of Next Previous Employer: _____
 Address: _____
 Your Job Title: _____

FROM: _____ HOURS PER WEEK: _____
 MONTH DAY YEAR

TO: _____ ANNUAL SALARY _____
 MONTH DAY YEAR STARTING ENDING

Supervisor's Name: _____ Title: _____
 May we contact your employer? Yes No Phone No. _____
 Your name while employed in this job if different from application: _____
 Duties and Responsibilities: _____

Reason(s) for Leaving: _____

4 Name of Next Previous Employer: _____
 Address: _____
 Your Job Title: _____

FROM: _____ HOURS PER WEEK: _____
 MONTH DAY YEAR

TO: _____ ANNUAL SALARY _____
 MONTH DAY YEAR STARTING ENDING

Supervisor's Name: _____ Title: _____
 May we contact your employer? Yes No Phone No. _____
 Your name while employed in this job if different from application: _____
 Duties and Responsibilities: _____

Reason(s) for Leaving: _____

5 Name of Next Previous Employer: _____
 Address: _____
 Your Job Title: _____

FROM: _____ HOURS PER WEEK: _____
 MONTH DAY YEAR

TO: _____ ANNUAL SALARY _____
 MONTH DAY YEAR STARTING ENDING

Supervisor's Name: _____ Title: _____
 May we contact your employer? Yes No Phone No. _____
 Your name while employed in this job if different from application: _____
 Duties and Responsibilities: _____

Reason(s) for Leaving: _____

BACKGROUND INFORMATION

ARE YOU A CITIZEN OF THE U.S.?

YES NO

If "no," do you possess one of the following: an I-151 Card, an I-551 Card, an I-94 Card Stamped "Employment Authorized," or any other proof of employment authorization from the Immigration And Naturalization Service?

YES NO

NOTE: If answer is "no" to both, you are ineligible for employment with the County of Sumter. The County of Sumter hires only U.S. citizens and lawfully authorized alien workers.

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR 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 TO 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, severity, and date of the offense in relation to the position for which you are applying are considered.

VETERAN'S PREFERENCE

Check the appropriate block if you are claiming veteran's preference and attach a copy of the honorable discharge documents.

- 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 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 unmarried widow or widower of a veteran who died of a service-related disability

Have you claimed Veteran's Preference in a previous successful hiring process? YES NO

Indicate the position(s) or type of position you wish to apply for:

- 1 _____
- 2 _____
- 3 _____

Do you currently have a relative employed by the County or are you related to an Elected Official of the County? YES NO

If "YES," please give the name of the employee/official and state relationship: _____

Date available to begin work: _____ Part-Time Temporary Full-Time
(month/day/year)

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 and fitness for county employment by employers, schools, law enforcement agencies, and other individuals and organizations to investigators, personnel staff, and other authorized employees of Sumter County government for employment purposes. I understand that applications submitted for county employment are public records. 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: _____

EEO SURVEY

Although the following information is not mandatory, it is requested to aid the County of Sumter in its commitment to Equal Employment Opportunity and Affirmative Action. It is unlawful for an employer to fail or refuse to hire any individuals or deprive any individual of employment opportunities because of race, color, religion, sex, national origin, age, marital status, or disability.

- A SEX MALE FEMALE
- B DATE OF BIRTH _____
- C RACE (Check One Only)
 - WHITE BLACK HISPANIC ASIAN/PACIFIC ISLANDER AMERICAN INDIAN/ALASKAN NATIVE
 - OTHER (Specify) _____

PLEASE DETACH AND RETAIN THIS INFORMATION

Please be advised that if you are not contacted within two weeks after the date of closing, the position you are applying for has been filled.

At such time, your application will be placed into the general file to be retained for two (2) years. As future jobs are posted, your application may be reviewed. Openings are posted on the job board, located on the 2nd floor of the historic Courthouse. You can also call our job hotline at (352) 568-6661 for any current listing.

After two years your application will be discarded. To update your application with any new information, please contact County Administration and ask that the information be changed.

Thank you for your application, and again, if you are not contacted within two weeks of the date of closing, the position has been filled. *If no date of closing has been indicated*, then please allow two weeks from the day you filed your application.