

Village Of El Portal

Application For Employment

IMPORTANT

Instructions for completing the application form.

1. Type or print clearly in black or blue ink.
2. Answer every question fully and accurately.
3. If an offer of employment is made to you, the Village may identify that it is contingent upon the results of a medical exam and/or a tax and background check.
4. FALSE OR MATERIALLY INACCURATE INFORMATION ON THIS APPLICATION WILL BE CAUSE FOR DISQUALIFICATION FOR EMPLOYMENT OR DISMISSAL AT ANY TIME AFTER EMPLOYMENT.
5. Read certification and releases carefully before signing.
6. Return completed application to:

**Village of El Portal
Office of the Village Manager
500 NE 87th St
El Portal, FL 33138**

Fax: 305 795 7884

This application will be kept on file for at least 30 days.

Village of El Portal

APPLICATION FOR EMPLOYMENT

Revised 12/1/05

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

It is the policy of the Village of El Portal to afford equal employment opportunity to all qualified persons regardless of race, color, religion, national origin, age, military status, sexual orientation, disability, or gender, except where age or sex is a bonafide occupational qualification as allowed by the Civil Rights Act of 1964.

PERSONAL INFORMATION	
Name (First) (Middle) (Last) <input type="checkbox"/> Mr. <input type="checkbox"/> Ms.	Home Telephone Number
Mailing Address (Street) (City) (State) Zip(Postal) Code	Business or Message Phone:
Home Address (if different from mailing address)	E-Mail Address:
Are you authorized to work in the U.S. on an unrestricted basis? YES <input type="checkbox"/> NO <input type="checkbox"/>	National ID (SS #) (optional)
Are you over age 18? YES <input type="checkbox"/> NO <input type="checkbox"/>	Who referred you to us? Agency <input type="checkbox"/> Employee <input type="checkbox"/> Newspaper advertisement <input type="checkbox"/> Commonwealth's Employment Opportunities (CEO) <input type="checkbox"/> Other
Have you been charged with a felony? YES <input type="checkbox"/> NO <input type="checkbox"/> (Charge will not necessarily disqualify an applicant from employment.) If yes, please explain.* _____ _____	_____ _____ _____
Have you been charged with a misdemeanor excluding a first degree misdemeanor conviction for speeding, or minor traffic violations, within the last 5 years? YES <input type="checkbox"/> NO <input type="checkbox"/> (Charge will not necessarily disqualify an applicant from employment.) If yes, please explain.* _____ _____	_____ _____ _____
*“An applicant for employment with a sealed record on file with the State of Florida may answer ‘no record’ with respect to an inquiry herein relative to prior arrests, criminal court appearances or convictions. In addition, any applicant for employment may answer ‘no record’ with respect to any inquiry relative to prior arrests, court appearances and adjudications in all cases of delinquency or as a child in need of services which did not result in a complaint transferred to the superior court for criminal prosecution.”	

EMPLOYMENT DESIRED	
POSITION APPLIED FOR:	Date you can start
NAME OF AGENCY WHERE POSITION IS LOCATED:	
Have you worked for the Village before? YES <input type="checkbox"/> NO <input type="checkbox"/>	Starting salary desired
Are you available for full time work? YES <input type="checkbox"/> NO <input type="checkbox"/>	Are you available for part time work? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you reviewed the essential functions of the job as listed on the CEO or job posting? YES <input type="checkbox"/> NO <input type="checkbox"/>	
In addition to your work history, what other experiences, skills or qualifications would qualify you for work with our agency? _____	

EDUCATION				
Name of School	Location City State	Main Course of Study	Did you Graduate	Degree

List any additional education or training:

PROFESSIONAL REFERENCES (not personal): List 3 people not related to you who can comment on your work performance.

Name	Address	Occupation	Telephone Number	Years Acquainted
1				
2				
3				

MILITARY SERVICE INFORMATION
This information is furnished on a voluntary basis.

Check all that apply to you: Veteran Disabled Veteran Vietnam Era Veteran
 Dates of Service: to Branch
 If Vietnam Era Veteran, have you been certified by the State Office of Affirmative Action? YES NO
 If yes, what is the Certification #? _____

EMPLOYMENT HISTORY

Are you employed now? Yes No

COMPLETE ALL INFORMATION IN FULL
 (A resume may not be substituted but may be included as a supplement)
 Begin with your most recent employment, including any present employment. Your present employer will not be contacted without your permission. You may include any verifiable work performed on a volunteer basis. Any gaps in employment must be briefly explained.

Company Name			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Street Address	Telephone		Specific Duties
City & State	Postal Code		
Job Title			
Supervisor			
Dates Employed:	From	To	Salary
Reason for Leaving			
Company Name			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Street Address	Telephone		Specific Duties
City & State	ZIP (Postal) Code		
Job Title			
Supervisor			
Dates Employed:	From	To	Salary
Reason for Leaving			
Company Name			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Street Address	Telephone		Specific Duties
City & State	ZIP (Postal) Code		

Job Title			
Supervisor			
Dates Employed:	From	To	Salary
Company Name			Reason for Leaving
Street Address			Telephone
City & State			ZIP (Postal) Code
Job Title			
Supervisor			
Dates Employed:	From	To	Salary
Company Name			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Street Address			Specific Duties
City & State			
Job Title			
Supervisor			
Dates Employed:	From	To	Salary
Company Name			Reason for Leaving

IF YOU NEED ADDITIONAL SPACE PLEASE ATTACH A SEPARATE SHEET

**RELEASE AND CERTIFICATION
PLEASE READ BEFORE SIGNING**

I understand that the foregoing will be verified in order to expedite my application for employment with the Village of El Portal. I hereby authorize the Village to conduct a full investigation into my background.

I authorize the Village to obtain my previous work records, employment records, character references and any other information concerning character, ability and habits and all other necessary information including any criminal charges that may have been made against me. Further I grant authority to the keeper of these records to release said records to the Village for the purpose of making its hiring decision. I agree that the Village shall not be liable in any respect if a job offer is not extended, is withdrawn, or my employment is terminated because of false statement, omissions or answers made by me on this application. I agree that my previous employers shall not be liable with regard to any information provided by them in connection with this release.

I certify under the pains and penalty of perjury that all statements made by me on this application are true and complete to the best of my knowledge and that I have withheld nothing, which, if disclosed, would affect this application unfavorably. I understand that any false statements, omissions or answers made by me on this application can result in my immediate termination.

In compliance with the Immigration and Reform and Control Act of 1986, I understand that I will be required to provide approved documentation that verifies my right to work in the United States on my first day of employment. I have received the list of approved documents with this application.

I understand that unless I attain permanent status pursuant to Employee Manual or am subject to the terms of a collective bargaining agreement, my employment will be at-will, which means that both the Village of El Portal and I are free to terminate the employment relationship at any time for any non-statutorily prohibited reason or for no reason at all, with or without notice.

I hereby acknowledge that I have read in full and understand the above statements and conditions of employment.

Signature of Applicant

Date

Printed Name