

**CITY OF BUNNELL, FLORIDA**

PO Box 756

Bunnell, FL 32110-0756

Telephone: 386-437-7500

Fax: 386-437-7503

**APPLICATION FOR EMPLOYMENT**

Received by: \_\_\_\_\_

Date Received: \_\_\_\_\_

Important Instructions: Hand-print or type neatly in black ink only. Fill in every blank line or box. If a blank line or box doesn't apply, enter "NA," or if you have no comment, enter "NC." A resume may be submitted with your completely filled-out Application for Employment form. Do not write "See Resume" in any of the blank lines or boxes.

Position applied for: \_\_\_\_\_

**APPLICANT'S FULL NAME:** \_\_\_\_\_

Desired wage/salary: \_\_\_\_\_ Date you can start: \_\_\_\_\_

Have you ever used a different first name, last name, or any nickname? Yes \_\_\_ No \_\_\_

If yes, please list names used: \_\_\_\_\_

Applicant's mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Daytime Phone number: \_\_\_\_\_ Other Phone number: \_\_\_\_\_

How did you learn of this job opening? \_\_\_\_\_

Are you 18 years old, or older?..... Yes\_\_ No \_\_

Can you legally hold a job in the USA?..... Yes\_\_ No \_\_

Are you currently employed?..... Yes\_\_ No \_\_

If not currently employed, were you laid off and/or subject to re-call?..... Yes\_\_ No \_\_

May we ask information about you from your current employer?..... Yes\_\_ No \_\_

Have you ever worked for the City of Bunnell before?..... Yes\_\_ No \_\_

Have you ever been arrested?..... Yes\_\_ No \_\_

If yes, please provide details below or attach detailed documentation including date(s), crime(s), disposition(s), probation(s), and location(s):

Job Applicant's full name: \_\_\_\_\_

**DRIVERS LICENSE**

Do you have a valid Florida Drivers License?..... Yes\_\_ No\_\_

What type of drivers license is it? Hardship\_\_ Operator\_\_ CDL Class D\_\_ C\_\_ B\_\_ A\_\_

Do you have less than six violation points charged against your license? Yes\_\_ No\_\_

Has your drivers license ever been suspended or revoked? Yes\_\_ No\_\_

If yes, give reason(s) and the month and year of each: \_\_\_\_\_

**MILITARY SERVICE**

Have you ever served in the US Army\_\_ Air Force\_\_ Navy\_\_ Marines\_\_ Coast Guard\_\_ or National Guard\_\_? Are you now in the National Guard or Reserve? Yes\_\_ No\_\_

What was your discharge? Honorable \_\_\_ Dishonorable \_\_\_ Other than honorable \_\_\_

What rank/grade did you achieve (E-3, O-2, etc.)? \_\_\_\_\_

What was your rating (communications, infantry, supply, medic, etc.)? \_\_\_\_\_

Are you claiming veteran's preference (attach DD Form 214)? Yes\_\_ No\_\_

**EDUCATION**

Level	Name of School City & State	# of Years	Diploma/ Degree	Type of Degree or Major discipline
High School	_____	_____	_____	_____
College	_____	_____	_____	_____
Voc-Ed	_____	_____	_____	_____

**PROFESSIONAL / VOCATIONAL CERTIFICATION(S) / LICENSE(S)**

1. \_\_\_\_\_

2. \_\_\_\_\_

**SPECIAL SKILLS**

List all, such as word-processing speed, operate front-end loader, mechanical, pipe laying, computer programs you're proficient at, electrical, operate tractor mower, crime investigation, construction inspection, HazMat training, conflict resolution, administration, etc.

Job Applicant's full name: \_\_\_\_\_

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REFERENCES

Do not list former employers, people related to you, or people you have known less than one year.

Name	City/State of Residence	Telephone	Years
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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RESUMES

I have a resume which I have attached for the City's consideration..... Yes\_\_ No \_\_

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OTHER PERTINENT COMMENTS OR REMARKS

Be all-inclusive. You may refer to attached/included documents. Include social as well as work matters.

AFFIRMATION OF APPLICANT

I certify that all information in this Application for Employment, including all attachments, is true and complete; and, I understand that if any false information, omissions, or misrepresentations are discovered I may be rejected from potential employment, and if employed this is grounds for termination. In consideration of the employment applied for, I agree to conform to the City's rules, regulations and policies. I understand that Florida is a "right to work" state; and, therefore, my employment and compensation can be terminated with or without cause at either my option or the City's option.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Job Applicant's full name: \_\_\_\_\_

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### EMPLOYMENT HISTORY

Start with your current, or most recent, job and list all former employers for the last ten years. If you need more space, photocopy the next page (page 5 of 6) before you fill it out.

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#### Current or Most Recent Job

Name of Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Job Title: \_\_\_\_\_

Summarize the work you did/do: \_\_\_\_\_

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Name & Title of Supervisor: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Dates Worked (Mo/Yr):    Started: \_\_\_\_\_    Ended: \_\_\_\_\_

Final Wage/Salary: \$ \_\_\_\_\_ per \_\_\_\_\_.    Hours worked per week: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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#### Next Most Recent Job

Name of Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Job Title: \_\_\_\_\_

Summarize the work you did/do: \_\_\_\_\_

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Name & Title of Supervisor: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Dates Worked (Mo/Yr):    Started: \_\_\_\_\_    Ended: \_\_\_\_\_

Final Wage/Salary: \$ \_\_\_\_\_ per \_\_\_\_\_.    Hours worked per week: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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Job Applicant's full name: \_\_\_\_\_

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CONTINUATION OF EMPLOYMENT HISTORY

Next Most Recent Job

Name of Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Job Title: \_\_\_\_\_

Summarize the work you did/do: \_\_\_\_\_

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Name & Title of Supervisor: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Dates Worked (Mo/Yr):    Started: \_\_\_\_\_    Ended: \_\_\_\_\_

Final Wage/Salary: \$ \_\_\_\_\_ per \_\_\_\_\_.    Hours worked per week: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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Next Most Recent Job

Name of Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Job Title: \_\_\_\_\_

Summarize the work you did/do: \_\_\_\_\_

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Name & Title of Supervisor: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Dates Worked (Mo/Yr):    Started: \_\_\_\_\_    Ended: \_\_\_\_\_

Final Wage/Salary: \$ \_\_\_\_\_ per \_\_\_\_\_.    Hours worked per week: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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Job Applicant's full name: \_\_\_\_\_

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***Applicant is not to type/write on this page.***

Application:

Neat: Yes \_\_\_ No \_\_\_; Writing is easily read: Yes \_\_\_ No \_\_\_; Complete: Yes \_\_\_ No \_\_\_

Recommendation for Interview: Yes \_\_\_ Potentially \_\_\_ No \_\_\_

Reviewed by: \_\_\_\_\_ Title: \_\_\_\_\_

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FIRST INTERVIEW: Date: \_\_\_\_\_ Structured: \_\_\_\_\_ Random: \_\_\_\_\_ Tour: \_\_\_\_\_

Interviewer: \_\_\_\_\_ Title: \_\_\_\_\_

Applicant was: Neat in appearance\_\_\_ Articulate\_\_\_ Confident\_\_\_ Sincere\_\_\_ Friendly\_\_\_  
Abrasive\_\_\_ Evasive\_\_\_ Not succinct\_\_\_ Seemed to have good understanding of the job\_\_\_

Other Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Recommended for a second Interview? Yes \_\_\_ No\_\_\_

References checked: Yes \_\_\_ No \_\_\_ Result \_\_\_\_\_

Former Employees Checked: Yes \_\_\_ No \_\_\_ Result \_\_\_\_\_

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SECOND INTERVIEW: Date: \_\_\_\_\_ Structured: \_\_\_\_\_ Random: \_\_\_\_\_ Tour: \_\_\_\_\_

Interviewer: \_\_\_\_\_ Title: \_\_\_\_\_

Applicant was: Neat in appearance\_\_\_ Articulate\_\_\_ Confident\_\_\_ Sincere\_\_\_ Friendly\_\_\_  
Abrasive\_\_\_ Evasive\_\_\_ Not succinct\_\_\_ Seemed to have good understanding of the job\_\_\_

Other Comments: \_\_\_\_\_  
\_\_\_\_\_

Recommended for Hiring by:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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