

## CITY OF VALPARAISO APPLICATION FOR EMPLOYMENT

Please Complete the Application in Legible Handwriting, Printing or Type. Please List Only One Position Per Application.

APPLICANT INFORMATION									
Last Name			First				M.I.	Date	
Street Address								Apartment/Unit #	
City			State				ZIP		
Phone			E-mail Address						
Date Available	Social Sec			urity No. Des			sired Salary		
Position Applied for									
Valid Driver's License? YES NO State and DL#									
Are you a citizen of the United States? YES NO I If no, are you authorized to work in the U.S.? YES NO I									
Type of Employment Desired?     Full-Time     Part-Time     Temporary									
Will you work hours other than 8am to 5pm? YES NO									
Will you work schedules other than Monday thru Friday? YES NO									
Will you accept temporary work? YES 🗌 NO 🗌									
Have you ever been employed by the City of Valparaiso YE before?				YES	YES NO If yes, please give dates and explanation				
Have you ever been discharged from employment YES NO If yes, please give dates and explanation									
Have you ever been convicted of a felony in the past 7 YES NO If yes, please give dates and explanation									
**Note: conviction does not necessarily bar you from employment									
EDUCATION									
High School			Address						
From	То	Did you grad	luate?	YES 🗌	NO 🗌	Degree			
College			Address						
From	То	Did you grad	luate?	YES 🗌	NO 🗌	Degree			
Other			Address						
From	То	Did you grad	luate?	YES	NO 🗌	Degree			

REFERENCES							
Please list three professional references.							
Full Name				Relationship			
Company				Phone (	)		
Address							
Full Name				Relationship			
Company				Phone (	)		
Address							
Full Name				Relationship			
				Phone ( )			
Address							
PREVIOUS EMPLOYMENT							
Company	<u>~</u>				)		
Address				Supervisor			
Job Title Starting Salary				\$	Ending Salary \$		
Responsibilities							
From	То	Reason for Leaving					
May we contact your previous supervisor for a reference? YES NO							
Company Phone ( )							
Company							
Address				Supervisor			
Job Title	le Starting Salary			\$	Ending Salary \$		
Responsibilities		1					
From	То	Reason for Leaving					
May we contact your previous supervisor for a reference? YES NO							
Company				Phone (	)		
Address				Supervisor			
Job Title Starting Salary				\$	Ending Salary \$		
Responsibilities				4			
From	То	Reason for Leaving					
may we contact yo	ui previous super	visuri un a reierence?	YES 🗌	NO 🗌			

 Mail To:

 City of Valparaiso, 465 Valparaiso Pkwy, Valparaiso, FL 32580

 Phone: (850) 729- 5402
 Fax: (850) 678-4553
 Web Site: <a href="http://www.valp.org">http://www.valp.org</a>

MILITARY SERVICE				
Branch	From To			
Rank at Discharge	Type of Discharge			
If other than honorable, explain				

LICENSES AND TRADES					
Commercial Driver License?	YES 🗌	NO 🗌	Type & Endorsements:		

## **DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I hereby give consent to duly authorized representatives of the City of Valparaiso to contact any former employers, educational institutions indicated, and any other persons or organizations that it determines might have information relevant to this application.

I further give consent to said organizations to divulge relevant information to the City of Valparaiso, notwithstanding that it might otherwise be confidential, such as records of disciplinary proceedings.

I understand that any information obtained by the City of Valparaiso in the course of those contacts will be treated confidences.

I understand that by accepting this application, the City incurs no liability for my future employment and that acceptance of an offer of employment does not create a contractual obligation upon the City to continue employment in the future.

In the event of employment, I understand that false or misleading information given on the application or in an interview may result in discharge.

If employed, I agree to abide by the work rules and regulations of the City of Valparaiso, Laws of the State of Florida, and applicable Federal Laws and Regulations.

Signature

How did you hear about this position? Walk-in  $\Box$ 

Newspaper 🗌 🛛 Web Site 🗌

Employee/Friend Other

Date

The City of Valparaiso is a Drug-Free Workplace Employer and requires applicants and employees to submit to Drug Testing. The City is an Equal Employment Opportunity Employer and will consider all applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status. Individuals who require accommodations in order to complete the employment application process should contact the Human Resources Manager at the phone number (850) 729-5402 or mailing address listed below.