



APPLICATION FORM

Answer each question completely and accurately. If a question does not apply, mark "N/A" on the appropriate line. Type or print legibly in ink.

Position Applying For: _____

Name: _____ **Social Security Number:** _____
 (Last First Middle)

Address: _____
 (Number Street City Zip)

Home Phone Number: () _____ **Business Phone Number:** () _____

	Yes	No	Give Details
Are you at least 18 years of age? (Employment subject to verification of minimum legal age for the job.)			
Are you a citizen of the United States?			
Have you ever served in the US Armed Forces? If so, state branch, entry and discharge dates, and type of discharge.			
Are you claiming veteran's employment preference? (Substantiating documentation must be filed with application.)			
Have you ever been employed in a position for which you have claimed veteran's employment preference after October 1, 1987? If yes, give details.			
Have you ever been employed by the City of Winter Haven? If yes, state when and where employed.			
Have you any relatives employed by the City of Winter Haven? If yes, indicate name, relationship, and where employed.			
Have you ever been dismissed from employment for inefficiency, delinquency, or misconduct? If yes, give details.			
>Have you ever at any time had adjudication withheld, plead guilty, no contest, or been convicted of any offense against the law? If yes, explain. ----- >Are you now under charges for any offence against the law? If yes, explain. -----			
Note: A conviction is not necessarily a disqualifying factor; give all facts so that a decision can be made; be truthful - this will be verified			
Have you ever been accused of unlawful harassment or discrimination, or have you ever had a related formal complaint filed against you? If so, give dates and explain the circumstances.			
Have you ever been a defendant in civil action for an intentional tort? If so, explain.			
Have you now or have you ever illegally used controlled substances or illegal drugs? If so, explain.			
Do you have a valid Florida Class A,B,C,D, or E driver license? If so, indicate which and record number.			

EDUCATION						
SCHOOL	NAME / LOCATION OF SCHOOL	DATE ATTENDED	COURSE OF STUDY	YEARS/ CREDITS COMPLETED	DID YOU GRADUATE?	DEGREE/ DIPLOMA
COLLEGE					YES _____ NO _____	
*HIGH					YES _____ NO _____	
ELEMENTARY					YES _____ NO _____	
OTHER					YES _____ NO _____	

* If not a high school graduate, do you have an equivalency diploma (GED), night school etc.?

No _____ Yes _____ Date received: _____

If you have any additional education experience, or have taken special courses, list these below. Please include: Where acquired and the total number of hours involved. _____

How did you learn of the employment opportunity for which you are applying? Newspaper Ad (Name of Paper, Radio, City

Employee, Other: _____

READ THIS APPLICATION AND YOUR ANSWERS CAREFULLY BEFORE SIGNING BELOW:

I certify that all statements made by me on this application are true, complete and correct to the best of my knowledge and belief. I understand and agree that if I make any misstatements or omissions of fact, I am subject to disqualification or dismissal and to such other penalties prescribed by law, personnel policy or regulations. I voluntarily give the Human Resources Office of the City of Winter Haven, or its duly authorized representative the right to make a thorough investigation of my past employment and activities, agree to cooperate in such investigation, and release all liability of responsibility of all persons, companies, or corporations supplying such information.

DATE: _____ SIGNATURE OF APPLICANT: _____

DO NOT WRITE BELOW THIS LINE

(FOR HUMAN RESOURCES USE ONLY): _____

DRIVING RECORD INFORMATION

**ADDENDUM TO
CITY OF WINTER HAVEN APPLICATION FORM**

The position you are applying for may require a valid Florida driver license of a particular class, with or without endorsements, and a safe driving record. Failure to state accurate information of falsification of any of the information requested herein may result in disqualification for employment consideration.

Have you had one (1) or more chargeable driving accidents or motor vehicle code violations within the past three (3) years? No _____ Yes _____

If yes, please indicate the following:

	<u>Date</u>	<u>Accident / Violation</u>	<u>Charge</u>	<u>City, County, State</u>	<u>Action Taken</u>
1.	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____

I acknowledge that the above information is true, complete and correct to the best of my knowledge and belief.

SIGNATURE OF APPLICANT: _____

DATE: _____

**Equal Employment Opportunity
Applicant Statistical Information**

The information requested below is used for statistical purposes only and NOT to evaluate your application for employment with the City of Winter Haven. Completion of this form by you is strictly voluntary. You are not legally required to supply this information; however, your assistance in doing is appreciated. Thank you.

Date _____	Position Applied For _____
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Age Group	<input type="checkbox"/>	16-22
	<input type="checkbox"/>	23-39
	<input type="checkbox"/>	40-70
	<input type="checkbox"/>	Over 70

Race Ethnic Origin	<input type="checkbox"/>	White, Non-Hispanic or Latino
	<input type="checkbox"/>	Black or Black and White, Non-Hispanic or Latino
	<input type="checkbox"/>	Hispanic or Latino
	<input type="checkbox"/>	Asian or Asian and White, Non-Hispanic or Latino
	<input type="checkbox"/>	American Indian/Alaskan Native, Non-Hispanic or Latino
	<input type="checkbox"/>	Native Hawaiian-Other Pacific Islander, Non-Hispanic or Latino
	<input type="checkbox"/>	Balance 2+ Races Non-Hispanic or Latino

Disabled	<input type="checkbox"/>	No	Description of Disability _____
	<input type="checkbox"/>	Yes	

Military Status	<input type="checkbox"/>	Non-Veteran	Actively Served During (Circle Applicable)	
	<input type="checkbox"/>	Veteran	WWII/Korea	Persian Gulf
	<input type="checkbox"/>	Disabled Veteran	Vietnam	Other

How did you learn of the position you are applying for?			
<input type="checkbox"/>	Walk-in, general job search	<input type="checkbox"/>	Winter Haven News Chief
<input type="checkbox"/>	Search firm or employment agency	<input type="checkbox"/>	The Ledger
<input type="checkbox"/>	Civic/professional organization	<input type="checkbox"/>	Other Newspaper
<input type="checkbox"/>	Internet/City web page	<input type="checkbox"/>	Magazine/Publication
<input type="checkbox"/>	City of Winter Haven Employee	<input type="checkbox"/>	Word of Mouth
<input type="checkbox"/>	College or University: _____	<input type="checkbox"/>	Other: _____