

APPLICATION FOR EMPLOYMENT

BAY COUNTY CLERK OF CIRCUIT COURT

AN EQUAL OPPORTUNITY EMPLOYER

DATE: _____

PERSONAL DATA	Name			
	Last	First	Middle	
	Present Address			
	No. and Street	City	State	Zip Code
	Permanent Address if Not The Same As Present Address			
	No. and Street	City	State	Zip Code
	INTENTIONALLY BLANK		Have You Ever Served in the U.S. Military?	
			Yes	No
	Telephone		Branch	
	Area Code	Number	Occupation or Skills Acquired	
		Type of Discharge		
Are You A U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		If No, Are You in the Country on a Visa Which Permits You to Work Here? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have You Ever Worked For Us?		If Yes, Give Name Used, When You Worked and Location		
<input type="checkbox"/> Yes <input type="checkbox"/> No				
Are You Related to Anyone Employed By Us?		If Yes, Give The Name of that Person, Relationship and Office Where Employed		
<input type="checkbox"/> Yes <input type="checkbox"/> No				
Are You Employed Now?		If Yes, May We Inquire of Your Present Employer?		
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		

POSITION	Position(s) Applied for	Salary Desired
	Date You Can Start Work?	Hours Available to Work <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Days <input type="checkbox"/> Evenings <input type="checkbox"/> Any
	How Were You Referred: <input type="checkbox"/> Advertisement <input type="checkbox"/> Employment Agency <input type="checkbox"/> Friend <input type="checkbox"/> Relative <input type="checkbox"/> Walk-In <input type="checkbox"/> Other	

EMPLOYMENT HISTORY			EMPLOYER'S NAME & ADDRESS	POSITION/RESPONSIBILITIES		
		Dates Employed				Immediate Supervisor
From		To	Telephone Number			
Salary			Reason for Leaving			
Beginning	Final					
	Dates Employed				Immediate Supervisor	
	From	To			Telephone Number	
	Salary				Reason for Leaving	
Beginning	Final					
	Dates Employed				Immediate Supervisor	
	From	To			Telephone Number	
	Salary				Reason for Leaving	
Beginning	Final					
	Dates Employed				Immediate Supervisor	
	From	To			Telephone Number	
	Salary				Reason for Leaving	
Beginning	Final					

Circle Highest Grade Completed:												
First Through Ninth Grade				High School			College			Graduate School		
1 2 3 4 5 6 7 8 9				10 11 12			13 14 15 16			17 18 19 20		
EDUCATION/TRAINING	Type Of School	Name and Address	Date		Major Course Work	Did You Graduate?	Degree					
	High School		From Mo/Yr	To Mo/Yr								
	Business or Trade											
	College											
	Graduate School											
	Other											

MISCELLANEOUS	List Driver's License Below: Type _____ No. _____ Exp. Date _____
	If known by other names at other employers listed under Employment History, please list those names: _____
	Have you been convicted of a felony within the last 7 years? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please explain: (An affirmative answer to the above does not disqualify an applicant from employment) _____
	List professional, trade, business or civic activities and offices held. (You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status) _____
	Have you ever been discharged or forced to resign for misconduct or unsatisfactory performance? <input type="checkbox"/> Yes <input type="checkbox"/> No Details if Yes _____

Is VETERANS' PREFERENCE Being Claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No Has VETERANS' PREFERENCE Been Claimed Since October 1, 1987? <input type="checkbox"/> Yes <input type="checkbox"/> No

REFERENCES List below three persons not related to you, whom you have known at least one year.			
Name	Address	Position	Years Acquainted
1.			
2.			
3.			

PLEASE READ AND SIGN STATEMENTS BELOW

I understand that I will be placed on a three (3) month probation period. I further understand that if I am terminated for unsatisfactory work performance within the three (3) month probation period, the Employer may seek to contest any unemployment benefit I might attempt to obtain as a result of my termination.

_____ (initials)

I understand and agree that all policies and procedures may be modified, amended or deleted by the employer with or without notice to me of such amendment, modification or deletion to policies and procedures whether oral or written are to be advisory only and are not to be interpreted as a contract of employment or to give me any right of continued employment and that my employment may be terminated at the will of either me or the Clerk and may be terminated with or without cause and with or without notice by either party. I also understand any other arrangements, agreements or understandings regarding the term of employment are hereby canceled and superseded, and that no amendment or exceptions to this statement is valid unless in writing.

_____ (initials)

I certify that all information given on this employment application, related employment papers and oral interviews is true and correct. I understand that the Employer will make a thorough investigation of my work and personal history. I authorize the giving and receiving of any such information requested by it. I understand that falsification of any information so given or other derogatory information discovered as a result of this investigation will subject me to immediate dismissal. If I am hired, I will conform to the rules and regulations of the Employer.

_____ (initials)

**BAY COUNTY CLERK OF CIRCUIT
COURT IS A DRUG-FREE
WORKPLACE AND REQUIRES TESTING
FOR DRUGS AS A CONDITION OF
EMPLOYMENT**

Print name

Date