



**APPLICATION.**

Have you ever been a member of the U.S. Armed Services? YES \_\_\_ NO \_\_\_

Type of Discharge? \_\_\_ Honorable \_\_\_ General \_\_\_ Other

If Other, Please Explain: \_\_\_\_\_  
\_\_\_\_\_

Active Duty Date: From: \_\_\_\_\_ To: \_\_\_\_\_

**EDUCATION**

High School Graduate: Yes \_\_\_ No \_\_\_

Name and Location: \_\_\_\_\_

Year Graduated: \_\_\_\_\_ High School Equivalent: \_\_\_\_\_  
Please give date and source: \_\_\_\_\_

Name and Location of College or University: \_\_\_\_\_  
\_\_\_\_\_

Dates Attended: \_\_\_\_\_

Major/Minor: \_\_\_\_\_

Degree(s) Attained: \_\_\_\_\_

Formal Training, such as Vocational, Business or other job related courses: \_\_\_\_\_  
\_\_\_\_\_

Dates Attended: \_\_\_\_\_

**OCCUPATIONAL/PROFESSIONAL LICENSES OR CERTIFICATES**

Type: \_\_\_\_\_

Number: \_\_\_\_\_

Date Obtained: \_\_\_\_\_ Renewal Date: \_\_\_\_\_

Drivers License or Chauffeurs License No. and State: \_\_\_\_\_

Has your Drivers License ever been suspended or revoked? YES \_\_\_ NO \_\_\_

If Yes, Please Explain: \_\_\_\_\_  
\_\_\_\_\_

**CURRENT EMPLOYMENT**

Job Title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Firm Name: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Kind of Business: \_\_\_\_\_

Immediate Supervisor's Name and Title: \_\_\_\_\_

Number of hours worked per week: \_\_\_\_\_

Brief description of duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**PREVIOUS EMPLOYMENT**

Job Title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Firm Name: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Kind of Business: \_\_\_\_\_

Immediate Supervisor's Name and Title: \_\_\_\_\_

Number of hours worked per week: \_\_\_\_\_

Brief description of duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**PREVIOUS EMPLOYMENT**

**Job Title:** \_\_\_\_\_ **From:** \_\_\_\_\_ **To:** \_\_\_\_\_

**Firm Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **Kind of Business:** \_\_\_\_\_

**Immediate Supervisor's Name and Title:** \_\_\_\_\_

**Number of hours worked per week:** \_\_\_\_\_

**Brief description of duties:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_

**CERTIFICATION:**

I am aware that any omissions, falsifications, misstatements, or misrepresentations above may disqualify me for certification as a civil process server in the Second Judicial Circuit and may be grounds for revocation at a later date. I understand that any information I give may be investigated as allowed by law. I consent to the release of information about my ability, employment history, and fitness for certification by employers, schools, law enforcement agencies, and other individuals and organizations to investigators for certification purposes. This consent shall continue to be effective during my certification should I be certified. I understand that applications submitted for certification are public record. I certify that to the best of my knowledge and belief all of the statements contained herein and on my attachments are true, correct, complete and made in good faith.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

OATH OF OFFICE

I solemnly swear or affirm that I will faithfully discharge the duties imposed upon me as a certified process server in accordance with the law and will abide by and effect service of process in accordance with the applicable Florida Statutes and Rules of Court.

I understand and agree that as an applicant for the status of certified process server, I will post with the Court Administrator, Second Judicial Circuit, a bond in the amount of five thousand dollars (\$5,000) in cash or sureties approved by the Court for the benefit of any person injured by me as a result of any wrongful act or omission relating to my activities as a process server.

I understand and agree that as an applicant for the status of certified process server, a national criminal background investigation will be performed to assure my eligibility for certification.

I solemnly swear or affirm that I have read and carefully studied Chapter 48, Florida Statutes, as now amended, and is thoroughly familiar with the provisions of Florida Law pertaining to service of civil process.

I understand that Florida Statutes 48.31 (2) provides, in part that,

A certified process server must be disinterested in any process he/she serves; if the certified process server willfully and knowingly executes a false return of service, he or she is guilty of a felony of the third degree punishable as provided in s. 775.082, s. 775.083, or s. 775.084, and shall be permanently barred from serving process in the state.

I further understand that, if appointed, I serve at the pleasure of the Chief Judge of the Second Judicial Circuit, and that my appointment may be revoked at his discretion in accordance with the law.

\_\_\_\_\_  
Applicant

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public, State of Florida

My Commission Expires:\_\_\_\_\_

**PROCESS SERVER'S BOND**

KNOW ALL MEN BY THESE PRESENTS, that we, \_\_\_\_\_  
\_\_\_\_\_, as Principal, and  
\_\_\_\_\_, as Surety, are held and  
firmly bound unto the Governor of the State of Florida for the benefit any person  
wrongfully injured by any malfeasance, misfeasance or incompetence of the applicant  
in connection with his/her duties as a Process Server, in the sum of FIVE THOUSAND  
DOLLARS (\$5,000.00) lawful money of the United States, for the payment whereof, well  
and truly to be made, we bind ourselves, our heirs, executors and administrators, jointly  
and severally, firmly by these present.

THE CONDITION OF THIS OBLIGATION is such that the above named  
Principal has applied for certification as a Process Server by the Chief Judge of the  
Second Judicial Circuit, State of Florida, and if the bounden \_\_\_\_\_  
shall faithfully perform the duties of his/her said office, as prescribed by law, then this  
obligation shall be void, otherwise to remain in full force and effect.

This bond shall be for a period of ONE (1) YEAR and may be renewed, by  
continuation certificate.

SIGNED AND SEALED this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

\_\_\_\_\_  
PRINCIPAL

IN THE SECOND JUDICIAL CIRCUIT  
OF FLORIDA

IN RE: APPLICATION FOR CERTIFICATION FOR  
CERTIFICATION OF CIVIL PROCESS SERVER

Name of Applicant: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Race: \_\_\_\_\_ Sex: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

\_\_\_\_\_ /

**SHERIFF'S ADVISORY FORM**

In accordance with Section 48.025, et seq., Florida Statutes, and Administrative Order 2003-11, Second Judicial Circuit Court, I understand that the above named applicant is seeking certification as a Certified Civil Process Server in the Second Judicial Circuit. As part of the application process, the applicant is required to obtain any comments from the six (6) Sheriff's in this Circuit or their designate, regarding the applicant's suitability and fitness for certification.

The undersigned, as a representative of the Office of Sheriff indicated ( mark one):

- \_\_\_ 1. Has no Objections to the certification of the applicant named above.
- \_\_\_ 2. Has no Opinion or Knowledge regarding the certification of the applicant named above;
- or
- \_\_\_ 3. Objects to certification of the applicant name above for the following reasons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed on \_\_\_\_\_, 200\_\_.

(Date)

Signature: \_\_\_\_\_  
Title: \_\_\_\_\_  
County of Office: \_\_\_\_\_

