

State of Florida

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Equal Opportunity Employer/Affirmative Action Employer The State of Florida does not tolerate violence in the workplace.

Where to Find Vacancy Information:

- On the Internet: http://jobsdirect.state.fl.us
- Jobs and Benefits Centers Consult your local telephone directory
- State Agency Personnel Offices

FOR OFFICIAL USE ONLY			
	/ /		
Agency Authorized Signature	Date	Class Code	Status
POSITION APPLIED FOR			
Agency:			
Title:			
Position Number:	Date Ava	ilable:	
Counties of Interest:			

Minimum Acceptable Salary:

GENERA	L INSTRUCTIONS	HOW DO WE CONTACT Y	OU?	
• Туре	or print in ink this application in its entirety.			
(Note	iy the position for which you are applying. : A separate application must be submitted for each cy. Photocopies are acceptable.)	Your Name		
	it your application to the office announcing the vacancy no han the close of business on the announced deadline date.	Social Security Number		
	our name in the Certification Section (page 4). All ation you submit is subject to verification.	Your Mailing Address		
specia	the agency's hiring authority in advance if you require al disability accommodations to participate in the yment process.	City	County	State Zip Code
		Home Phone	Business Phone	SUNCOM (State Employees)
EDUCA	TION	E-mail Address		
HIGH SC				

HIGH SCHOOL:								
NAME / LOCATION OF SCHOOL		RECEIVED:	Diploma		Other (spec	ify)		None
YOUR NAME, IF DIFFERENT WHILE ATTENDI								
COLLEGE, UNIVERSITY OR PROFESSIO	ONAL SCHOOL: (TRANSCRIPTS M	IAY BE REQUIRED)						
NAME OF SCHOOL	LOCATION		ATTEN	ES OF NDANCE TH / YEAR) TO	HO	EDIT URS NED SEM	MAJOR / MINOR COURSE OF STUDY	TYPE OF DEGREE EARNED

YOUR NAME, IF DIFFERENT WHILE ATTENDING SCHOOL: _

JOB-RELATED TRAINING OR COURSE	WORK: (VOCATIONAL, TRADE, GOVERNMENTAL, BUSIN	NESS, ARMEI	D FORCES, E	TC.)				
NAME OF SCHOOL	LOCATION	ATTE	ES OF NDANCE TH/YEAR)	CRE HOL EAR	JRS	COURSE OF STUDY		NING LETED?
		FROM	TO	CLASS	CLOCK		YES	NO

YOUR NAME, IF DIFFERENT WHILE ATTENDING SCHOOL: _

LICENSURE, REGISTRATION, CERTIFICATION EXAMPLES: Driver License, Teacher Certification, RN, LPN, PE, CPA, etc.

· · ·				
LICENSE, REGISTRATION OR CERTIFICATION:	Number	Date Received	Expiration Date	State Licensing Agency

PERIODS OF EMPLOYMENT

lame of Present or Last Employer:	Phone No.: () YOUR NAME IF DIFFERENT DURING EMPLOYMENT
Job Title:	YOUR NAME IF DIFFERENT DURING EMPLOYMENT
A: /YearTO: /YearHOURS PER WEEK:	YOUR NAME IF DIFFERENT DURING EMPLOYMENT
s and Responsibilities:	Phone No.: ()
on For Leaving:	Phone No.: ()
lame of Next Previous Employer: P ess: P Job Title: Supervisor's Name: /:// TO:// HOURS PER WEEK: (Phone No.: ()
Pess: P Job Title: Supervisor's Name: A:/ // Month // HOURS PER WEEK: ()	YOUR NAME IF DIFFERENT DURING EMPLOYMENT
Job Title:	YOUR NAME IF DIFFERENT DURING EMPLOYMENT
1:// TO:// HOURS PER WEEK: (YOUR NAME IF DIFFERENT DURING EMPLOYMENT
on For Leaving:	
ame of Next Previous Employer:	
ess: P	Phone No.: ()
Job Title: Supervisor's Name:	
A:// TO:// HOURS PER WEEK: (YOUR NAME IF DIFFERENT DURING EMPLOYMENT
s and Responsibilities:	
on For Leaving:	

2

Name of Next Previous Employ	/er:		
			Phone No.: ()
FROM:///////	_ TO: _///	HOURS PER WEEK:	() YOUR NAME IF DIFFERENT DURING EMPLOYMENT
Reason For Leaving:			
g			
Name of Next Providue Employ	/er:		
Address:			Phone No.: ()
Your Job Title:		Supervisor's Name:	
FROM://	_ то://	HOURS PER WEEK:	(
	MONTH DAY YEAR		
Reason For Leaving:			
Reason For Leaving:			
	/er:		
Name of Next Previous Employ	/er:		
Name of Next Previous Employ	/er:		Phone No.: ()
Name of Next Previous Employ Address: Your Job Title:	/er:	Supervisor's Name:	Phone No.: ()
Name of Next Previous Employ Address: Your Job Title:	/er:	Supervisor's Name:	Phone No.: ()
Name of Next Previous Employ Address: Your Job Title: FROM:/	/er:	Supervisor's Name: HOURS PER WEEK:	Phone No.: ()
Name of Next Previous Employ Address: Your Job Title: FROM:/	/er://///	Supervisor's Name: HOURS PER WEEK:	Phone No.: ()
Name of Next Previous Employ Address: Your Job Title: FROM:/	/er://///	Supervisor's Name: HOURS PER WEEK:	Phone No.: ()
Name of Next Previous Employ Address: Your Job Title: FROM:/	/er://///	Supervisor's Name: HOURS PER WEEK:	Phone No.: ()
Name of Next Previous Employ Address: Your Job Title: FROM:/	/er://///	Supervisor's Name: HOURS PER WEEK:	Phone No.: ()
Name of Next Previous Employ Address: Your Job Title: FROM:/	/er://///	Supervisor's Name: HOURS PER WEEK:	Phone No.: ()
Name of Next Previous Employ Address: Your Job Title: FROM:/	/er://///	Supervisor's Name: HOURS PER WEEK:	Phone No.: ()
Name of Next Previous Employ Address: Your Job Title: FROM:// Duties and Responsibilities:	/er:///	Supervisor's Name: HOURS PER WEEK:	Phone No.: ()
Name of Next Previous Employ Address: Your Job Title: FROM:// Duties and Responsibilities:	/er://///	Supervisor's Name: HOURS PER WEEK:	Phone No.: ()

KNOWLEDGE / SKILLS / ABILITIES (KSAs)			
List KSAs you possess and believe relevant to the position you seek, such as operating heavy	equipment, computer skil	ls, fluency in lan	guage(s), etc.
EXEMPTION FROM PUBLIC RECORDS DISCLOSURE			
ARE YOU A CURRENT OR FORMER LAW ENFORCEMENT OFFICER, OTHER EMPLOYEE** C OR CHILD OF ONE, WHO IS EXEMPT FROM PUBLIC RECORDS DISCLOSURE UNDER §119.0		YES	NO
**Other covered jobs include: correctional and correctional probation officers, firefighters, certain jud statewide prosecutors, personnel of the Department of Revenue or local governments whose respo support enforcement, and certain investigators in the Department of Children and Families [see §11	nsibilities include revenue		
BACKGROUND INFORMATION			
HAVE YOU EVER BEEN CONVICTED OF A FELONY OR A FIRST DEGREE MISDEMEANOR?		YES	
If "YES", what charges?			
Where convicted?	Date of Conviction:		
HAVE YOU EVER PLED NOLO CONTENDERE OR PLED GUILTY TO A CRIME WHICH IS A FELONY OR A FIRST DEGREE MISDEMEANOR?		YES	NO
If "YES", what charges?			
Where?	Date:		
HAVE YOU EVER HAD THE ADJUDICATION OF GUILT WITHHELD FOR A CRIME WHICH IS A FELONY OR A FIRST DEGREE MISDEMEANOR?		YES	NO
If "YES", what charges?			
Where?	Date:		
NOTE: A "YES" answer to these questions will not automatically bar you from employment. The nat the position for which you are applying are considered.	ture, job-relatedness, seve	rity and date of th	ne offense in relation to
CITIZENSHIP			
The State of Florida hires only U.S. citizens and lawfully authorized alien workers. If a conditional or identification and proof of citizenship or authorization to work in the U.S.	ffer of employment is made	e, you will be requ	uired to provide
ARE YOU A U.S. CITIZEN OR ARE YOU LEGALLY AUTHORIZED TO WORK IN THE U.S.?		YES	
RELATIVES			
TO YOUR KNOWLEDGE, DO YOU HAVE ANY RELATIVES WORKING IN THIS AGENCY?		YES	NO
SELECTIVE SERVICE SYSTEM REGISTRATION			
All males between the ages of 18 and 26 must be registered with the Selective Service System of	r exempted.		
IF YOU ARE A MALE BETWEEN THE AGES OF 18 AND 26, DO YOU HAVE PROOF OF REGIST WITH THE SELECTIVE SERVICE SYSTEM OR EXEMPTION FROM SUCH REGISTRATION?	RATION	YES	NO
CERTIFICATION			
I am aware that any omissions, falsifications, misstatements, or misrepresentations above hired, may be grounds for termination at a later date. I understand that any information I give may be in about my ability, employment history, and fitness for employment by employers, schools, law er investigators, personnel staff, and other authorized employees of Florida state government for employ my employment if I am hired. I understand that applications submitted for state employment are put my knowledge and belief all of the statements contained herein and on any attachments are true ,	vestigated as allowed by law nforcement agencies, and pyment purposes. This cons polic records except as exen	w. I consent to the other individuals sent shall continue npted above. I ce	release of information and organizations to to be effective during rtify that to the best of
SIGNATURE:	DATE:		

Employer, remove this section upon completion of the selection process.

YOUR NAME:

POSITION TITLE FOR WHICH YOU ARE APPLYING: _

POSITION NUMBER:

VETERANS' PREFERENCE INFORMATION

Completion of the Veterans' Preference section below is made on a voluntary basis and kept confidential in accordance with the Americans with Disabilities Act. Listed below are the four Veterans' Preference categories.

- 1. A veteran with a service-connected disability who is eligible for or receiving compensation, disability retirement, or pension under public laws administered by the U.S. Department of Veterans' Affairs and the Department of Defense, *or*
- 2. The spouse of a veteran who cannot qualify for employment because of a total and permanent disability, or the spouse of a veteran missing in action, captured, or forcibly detained by a foreign power, or
- 3. A veteran of any war who has served on active duty for one day or more during a wartime period, excluding active duty for training, and who was discharged under honorable conditions from the Armed Forces of the United States of America, **or**
- 4. The unremarried widow or widower of a veteran who died of a service-connected disability.

A **DD214** or comparable document which serves as a certificate of release or discharge **must be furnished at the time of application**. In addition, applicants claiming categories 1, 2, or 4 above must furnish supporting documentation in accordance with the provisions of Rule 55A-7.013, F.A.C. Wartime periods are defined in §1.01, F.S. Veterans' Preference shall expire after an eligible person has been employed by the state or an agency of a political subdivision of the state. Under Florida law, preference in appointment shall be given by the state to those persons in categories 1 and 2 and then those in categories 3 and 4. Veterans' Preference is only available to Florida residents.

If an applicant claiming Veterans' Preference for a vacant position is not selected, he/she may file a complaint with the Florida Department of Veterans' Affairs, P.O. Box 31003, St. Petersburg, Florida 33731-8903. A complaint must be filed within 21 days of the applicant receiving notice of the hiring decision made by the employing agency or within 3 months of the date the application is filed with the employer if no notice is given.

VETERANS' PREFERENCE CLAIM IF ELIGIBLE, WHICH VETERANS' PREFERENCE CATEGORY ARE YOU CLAIMING? (Please indicate number from Veterans' Preference Information section above.)				
HAVE YOU EVER BEEN EMPLOYED BY ANY GOVERNMENTAL ENTITY WITHIN THE STATE OF FLORIDA?	YES	NO		
ARE YOU A RESIDENT OF THE STATE OF FLORIDA?	YES	NO		
NOTE: If you are claiming Veterans' Preference you must meet the criteria and substantiate your claim by furnishing a DD 214 (Certificate of Release or Discharge from Active Duty) and any other required supporting documentation with your application.				

	Employer, remove this section prior to the selection process.
EEO SUR	/EY
Refusal to answ	owing information is not mandatory, it is requested to aid the State of Florida in its commitment to Equal Employment Opportunity and Affirmative Action. er will not result in adverse treatment of any applicant. Applicants who believe they have been discriminated against may file a complaint with the Florida Human Relations, Building F, Suite 240, 325 John Knox Road, Tallahassee, Florida 32303.
POSITION TITL	E FOR WHICH YOU ARE APPLYING:
POSITION NUM	IBER:
SEX:	
DATE OF BIRT	H:
RACE (Check C	Only One):
	🗌 WHITE (Non-Hispanic) 🗌 BLACK (Non-Hispanic) 🗌 HISPANIC 🗌 ASIAN or PACIFIC ISLANDER 🗌 NATIVE AMERICAN
	OTHER (Specify)

Employment with the State of Florida

The State is a major employer in Florida offering many challenging and rewarding career opportunities. Included among the many advantages of working for the State are the diverse and interesting job opportunities as well as competitive salaries, benefits, and career mobility.

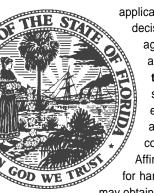
Most state jobs are in the **Career Service** personnel system. The Career Service system provides uniform pay, job classification, benefits, and recruitment for the majority of non-management jobs within state agencies. Career Service employees can move between agencies without any loss of state benefits.

Non-Career Service jobs include upper management and policy-making jobs in the Senior Management Service (SMS), middle management and professional positions such as physicians, attorneys, bureau chiefs in the Selected Exempt Service (SES), and temporary jobs funded by Other Personal Services (OPS). OPS employees receive an hourly wage but no benefits such as insurance, leave, or retirement.

Non-Career Service agencies are agencies in which all positions are not a part of the Career Service system and their employment procedures may differ. For example, in most cases, they may require different applications and their job titles and salaries may not be comparable to the Career Service system.

EMPLOYMENT PROCESS

Individual state agencies are responsible for announcing their job vacancies, accepting



applications, and making hiring decisions. Generally, agencies accept job applications for **advertised vacancies** only. In some instances, however, agencies may accept applications on a continuous basis to meet Affirmative Action goals and for hard-to-fill vacancies. You

may obtain applications from any Career Service agency personnel office or any Florida Jobs and Benefits Center (formerly Job Service of Florida). A legible original or photocopy of the State of Florida employment application is normally required for each job vacancy for which you apply. It is also possible to obtain an application form and to apply electronically via the Internet for many vacancies at:

http://jobsdirect.state.fl.us

LOCATING VACANT POSITIONS

There are several ways for you to obtain state job vacancy information:

- Vacancy information is available on the Internet at: http://jobsdirect.state.fl.us.
- Contact individual Career Service agencies directly for information regarding their employment opportunities.
- Contact a Florida Jobs and Benefits Center for job vacancy information for all Career Service agencies, including jobs in the Selected Exempt and Senior Management Services. Check your telephone directory under "Florida Jobs and Benefits Center" or "Job Service of Florida" to locate the office nearest you.

Since agencies are not required to advertise **OPS** temporary jobs, you may wish to contact any of the state agencies for **OPS** employment consideration.

JOB SEARCH TIPS

Market yourself. Prior to completing the application, gather specific information relating to the position you seek by reviewing the job opportunity announcement or by contacting the employing agency for a description of duties and relevant knowledge, skills, and abilities. Use this information to assist you in preparing your application, cover letters, resumes and other support materials.

COMPETING IN THE SELECTION PROCESS

The first step an employing agency takes in the selection process is to review the applications which have been received to determine who is eligible to compete further in the selection process. The agency then uses job-related criteria to determine those applicants who will be asked to participate in additional assessment steps such as an oral interview, a work sample exercise, or a proficiency test. The job-related information gained during the selection process will assist the hiring official in making the final selection decision. Veterans' preference and Affirmative Action goals are also considered by the agency in the decision-making process.

If, because of a disability, you require a special accommodation to participate in the application and selection process, please notify the hiring authority in advance.