

APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer dedicated to non-discrimination in employment on the basis of race, color, age, religion, sex, national origin, disability, marital status or veteran status.

SUMTER COUNTY PROPERTY APPRAISER

Date: _____

Are you 18 years of age or older () Yes () No

Name: _____
Last First Middle

Present Address: _____
Street City State

Permanent Address: _____
Street City State

Phone No: _____ Referred by: _____

Are you related to anyone who works for this Property Appraiser? If so, please state name & location:

POSITION DESIRED

Position: _____ Date you can start: _____

Are you employed now? _____ If so, may we contact your present employer? _____

Are there any days or hours you will not work? _____ If yes, explain _____

EDUCATION Name & Location of School Degree/Certificates Grade Average

High School _____

College _____

Trade, Business or Correspondence School _____

Other (including Graduate School) _____

Have you ever been convicted of, or pled guilty, no contest or nolo contendere to a crime? () Yes () No

If yes, give details of date, place, offense(s), disposition, etc. _____

Have you ever been charged with a crime and either been placed on a court ordered probation, had adjudication withheld, or entered a pre-trial intervention program? () Yes () No If yes, give details of date, place, offense(s) charged, disposition, etc. _____

(2)

PREVIOUS EMPLOYMENT: List below sequentially all of your employers in the last ten (10) years beginning with your current or most recent employer. (Use additional pages if necessary)

Date Month & Year	Name, Address & Telephone No. of Employer	Position & Job Duties	Salary	Reason for Leaving
From: _____				
To: _____				
From: _____				
To: _____				
From: _____				
To: _____				
From: _____				
To: _____				
From: _____				
To: _____				

Did you work for any of these employers under a different name? () Yes () No

If yes, which employer(s) and under what name(s)? _____

Please explain any gaps in your employment history: _____

Have you received any written reprimands or disciplinary suspensions during any previous employment? () Yes () No

If yes, please explain: _____

Have you ever been discharged or asked to resign? () Yes () No If yes, please explain including by whom, when and for what. Attach separated page if necessary: _____

(3)

DRIVING RECORD:

Do you have a valid driver's license? () Yes () No What class of license do you possess? _____

Have you had a suspension or probation of your license within the last five (5) years? () Yes () No

How many speeding or other moving violations have you received in the last three (3) years?

List below all traffic violations (except parking) on your record for the last five (5) years and all motor vehicle accidents in which you were involved (use additional page if necessary).

DATE	LOCATION	DESCRIPTION	RESULT
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

REFERENCES: Give below the names of three persons not related to you, whom you have known at least one year.

	Name	Address	Business	Aquainted
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

BACKGROUND CHECK INFORMATION

In order for the Sumter County Property Appraiser's office to do a background check, please provide the following information:

Name: _____
Last First Middle

Present Address: _____
Street City State

Social Security No. _____

List driver's license number and State? _____

Date

Signature of Applicant

APPOINTMENT APPLICATION CERTIFICATION

I hereby certify that all of the facts and information listed on this appointment application are true and complete. I understand that any false, incomplete or misleading information given by me on this application is sufficient cause for rejection of this application. I also understand and agree that any such false, incomplete or misleading information discovered on this application at any time after I am employed may result in my dismissal.

I hereby authorize the Property Appraiser to investigate all statements contained in this application, to interview the references and previous employers listed in this application, and to obtain a report from a consumer reporting agency to be used for employment purposes in accordance with Fair Credit Reporting Act. I authorize the references and previous employers listed to give the Property Appraiser all the facts, opinions and evaluations concerning my previous employment and any other information they may have, personal or otherwise, and release all such parties from any liability which may allegedly arise from furnishing such information to the Property Appraiser, including, but not limited to, any liability for defamation or invasion of privacy.

If I am offered appointment, I understand that such an offer will be conditioned upon satisfactory results of a background investigation and/or medical examination or inquiry, including a drug screen test. If then employed, I understand that I will be required to serve a ninety (90) day training period. I further understand that my appointment is at the discretion of the Property Appraiser and compensation and appointment can be terminated, with or without cause or notice, at any time, regardless of the successful completion of my training period, at the option of either the Property Appraiser or me. I understand that no supervisor or other representative of the Property Appraiser has any authority to enter into any agreement for appointment for any specified period of time, or to make any agreement contrary to the foregoing.

I further understand and voluntarily agree as a condition of work or my continued appointment that I may be requested by the Property Appraiser to submit to a urinalysis or other drug or alcohol screen test and that my failure to take such test(s) when requested to do so or unsatisfactory test results will disqualify me from consideration for work, or if I am then working, may result in my immediate dismissal.

I certify that I have read, understand and agree with the above.

Signature of Applicant

Date

MILITARY RECORD:

Were you in the US Armed Forces? () Yes () No If yes, which Branch? _____

Did you receive any training in the US Armed Forces that is relevant to this office? _____

Employment in this office will require a copy of your DD-214.

VETERANS' PREFERENCE: (Complete this section only if you are claiming Veterans' Preference)

Have you entered into covered employment by a covered employer after having claimed preference since October 1,

1987? () Yes () No If yes, give name of employer: _____

If you claim Veterans' Preference, check the type below. Attach copies of the required documents to your application to support your claim. (Documents will not be returned)

_____ 1. Veteran of wartime era – Requires (A) DD214 or other document showing dates of service and type of discharge.

_____ 2. Disabled Veteran – Requires (A) and (B) letter of service connected disability from the V.A.

_____ 3. Veterans' Widow – Requires (A) and marriage and death certificates, and statement saying not remarried.

_____ 4. Disabled Veterans' Spouse – Requires (A) and (B), evidence of marriage to the veteran, a statement that the spouse is still married at the time of application, and proof that the disabled veteran cannot qualify for employment because of disability.

_____ 5. Permanently Disabled Veteran – Requires (A) indicating veteran is permanently disabled, or (A) and letter from V.A. indicating that the veteran is permanently disabled.

_____ 6. Receipt of any Armed Forces Expeditionary Medal – Requires (A) DD214

Veterans' Preference documentation must be submitted at the time of initial application. If any preference-eligible applicant claiming Veterans' Preference for a vacant position is not selected for the position, they have the right to an investigation by the Division of Veterans' Affairs if a non-preference-eligible applicant is appointed to a position. In order to commence the investigation, the applicant must file a written complaint addressed to the Division of Veterans' Affairs, P O Box 1437, St. Petersburg, FL 33731. A complaint shall be filed within 21 days after notice of a hiring decision. If a notice of a hiring decision is not given, it is the responsibility of the veteran to contact the employer within two months of the application to determine if the position has been filled. For further information, contact the Department of Veterans' Affairs.