



1776 Independence Lane Maitland, FL 32751 407-539-6200

Application for Employment

**** ALL APPLICANTS NOTE**** EMPLOYMENT APPLICATION, ATTACHMENTS AND THE INFORMATION CONTAINED THEREIN, ARE PUBLIC RECORDS AND UNDER THE FLORIDA PUBLIC RECORDS ACT CHAPTER 119 FLORIDA STATUTES, MAY BE RELEASABLE UPON REQUEST, UNLESS AN EXEMPTION APPLIES [F.S. 119.071].

THE CITY OF MAITLAND IS AN EQUAL OPPORTUNITY EMPLOYER THAT DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, DISABILITY, MARITAL OR VETERAN STATUS OR ANY OTHER LEGALLY PROTECTED STATUS.

PLEASE PRINT. Complete the entire application. You may attach a resume, but you must still complete all questions; or your application will be deemed incomplete and may not be considered.

Position Applying For:			Date of Application:			
How Did You Learn About Us? Check all that apply:						
<input type="checkbox"/> Walk-in <input type="checkbox"/> Employment Agency <input type="checkbox"/> Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Relative <input type="checkbox"/> Other: _____						
Last Name		First Name		Middle Name		Other names under which you have attended school or been employed:
Street No.	Street Name		Apt No.	City, State & Zip:		
Home Phone:		Cell/Alt Phone #:		Email:		
Best Time to contact you at home		__ : __ AM __ : __ PM				
If you are under 18 years of age, can you provide required proof of your eligibility to work?		<input type="checkbox"/> Yes <input type="checkbox"/> No				
Have you ever filed an application with us before?		<input type="checkbox"/> Yes <input type="checkbox"/> No		If YES, give date:		
Have you ever been employed with us before?		<input type="checkbox"/> Yes <input type="checkbox"/> No		If YES, give date:		
Do any of your friends or relatives work here?		<input type="checkbox"/> Yes <input type="checkbox"/> No		If YES, state name, relationship and location:		
Are you currently employed?		<input type="checkbox"/> Yes <input type="checkbox"/> No				
May we contact your present employer?		<input type="checkbox"/> Yes <input type="checkbox"/> No				
Date available for work: ___/___/___			What is your desired starting salary? \$_____			
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? <i>Proof of citizenship or Immigration status will be required upon employment. (City uses E-Verify)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No						

Are you available to work: Full Time
 Part Time (Please indicate: Morning Afternoon Evening)
 Temporary (Please indicate dates available): ___/___/___ - ___/___/___

If a job requirement, check all which you will be able to work:
 Saturday Sunday Holidays Nights Various Shifts

Do you possess a valid driver's license? Yes No

Has your driver's license been denied, restricted, revoked or suspended within the past three years? Yes No
 If yes, explain: _____

Can you travel if a job requires it? Yes No

EDUCATION

School	Name and Address of School	Did you graduate?	Course of Study	Years Completed	Diploma/ Degree received
High School:		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Undergraduate College:		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Graduate/ Professional:		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Other (Specify):		<input type="checkbox"/> Yes <input type="checkbox"/> No			

Describe any specialized training, apprenticeship, skills and extra- curricular activities.

Describe any job related training received in military services.

WORK EXPERIENCE

Begin with your current or most recent employer. If you held multiple positions with the same organization, detail each position separately. Include any job-related military service assignments and volunteer activities. Attach additional sheets if necessary. Complete all questions in this section. You may write “See Resume” only on the work experience section. It is the applicant’s responsibility to ensure a resume is attached.

(Current or Most Recent) Employer 1:		Employer Full Address and Telephone Number(s):	Starting/Present Job Title:
Starting Salary:	Final Salary:	Dates Employed: From: ___/___/___ To: ___/___/___ <input type="checkbox"/> Full time <input type="checkbox"/> Part-time	
Supervisor’s Name, Title and Phone #:		May we Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for Leaving:
Work Experience:			

Employer 2:		Employer Full Address and Telephone Number(s):	Starting/Present Job Title:
Starting Salary:	Final Salary:	Dates Employed: From: ___/___/___ To: ___/___/___ <input type="checkbox"/> Full time <input type="checkbox"/> Part-time	
Supervisor’s Name, Title and Phone #:		May we Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for Leaving:
Work Experience:			

WORK HISTORY- (Cont'd)

Employer 3 :		Employer Full Address and Telephone Number(s):	Starting/Present Job Title:
Starting Salary:	Final Salary:	Dates Employed: From: ___/___/___ To: ___/___/___ <input type="checkbox"/> Full time <input type="checkbox"/> Part-time	
Supervisor's Name, Title and Phone #:		May we Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for Leaving:
Work Experience:			

Employer 4 :		Employer Full Address and Telephone Number(s):	Starting/Present Job Title:
Starting Salary:	Final Salary:	Dates Employed: From: ___/___/___ To: ___/___/___ <input type="checkbox"/> Full time <input type="checkbox"/> Part-time	
Supervisor's Name, Title and Phone #:		May we Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for Leaving:
Work Experience:			

Comments: Include explanation of any gaps in employment.

MISCELLANEOUS:

Have you ever been involuntarily released from any job?

Yes No

If "YES", Explain below:

List professional, trade, business or civic activities and offices held which relate to the position.

ADDITIONAL INFORMATION

Other Qualifications Summarize special job-related skills and qualifications acquired from employment or other experience.

SPECIALIZED SKILLS (Skills/Equipment Operated)

<input type="checkbox"/> Spreadsheet	Production/Mobile Machinery (list)	Other (list)
<input type="checkbox"/> Word Processing	_____	_____
<input type="checkbox"/> PC/MAC	_____	_____
<input type="checkbox"/> Typewriter WPM _____		

State any additional information you feel may be helpful to us in considering your application.

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given. YES NO

PERSONAL/PROFESSIONAL REFERENCES Do not include family members.

Name	Phone Number	Best Time to Call	Occupation
1.			
2.			
3.			
4.			
5.			

SEEKING EMPLOYMENT WITH THE CITY OF MAITLAND

1. FILING APPLICATIONS:

- A. Applications are accepted only when there is a position vacancy and an announcement is posted.
- B. All applications for employment must be postmarked by the advertised closing date, no exceptions. The City of Maitland reserves the right to fill a vacancy prior to the published closing date.
- C. Applications/resumes, and additional support documents may be submitted prior to the closing date of the vacancy and are accepted at City Hall between the hours of 8:00 a.m. and 5:00 p.m., Monday through Friday. Please ensure you have filled out your email address on #14, or if you do not have an email, fill out your name and address on the postcard attached to the application as this will be used to notify you of your application status when considered for a position vacancy.
- D. An application is considered only for the vacant position applied for. If there is more than one vacant position, a separate application for each is required. An application received for a current vacancy will not be considered for any future vacancy.
- E. Persons who request/receive a blank application may return it by mail. However, the envelope must be postmarked on or before the announced closing date for the position.
- F. An applicant selected to fill a vacancy will be subject to passing a medical evaluation, to include a drug screening test, as a condition of employment.

2. **VETERANS:** In order to be considered for Veterans' Preference through the City of Maitland, you must complete and submit a Veterans' Preference Form with your application and submit your DD-214, or other official documents which substantiate your eligibility for Veterans' Preference, i.e. branch of service, entry and discharge dates, and the type of discharge. (Veterans' Preference Forms are available upon request from the Personnel Department). If applying on-line, e-mail your DD-214 or other official documents to hr@itsmymaitland.com, or fax your DD-214 or other official documents to 407/539-6282 attention Personnel. Documentation not received within the announcement period will not be considered.

3. REFERRAL OF APPLICATIONS:

- A. Applications are not normally forwarded to the hiring department/division prior to the closing date. An exception to this would be if the posting contains the statement "Position is open until filled" or in an unusual or emergency situation.
- B. After the position has closed, the Personnel Department will screen applications to determine if they meet the minimum qualifications as posted for the position. The Personnel Department will:
 - (1) Forward to the hiring department/division all applications determined to be qualified.
- C. The hiring department/division will:
 - (1) Review and select applicants for interview,
 - (2) Contact selected applicants for interview, and
 - (3) Make a selection decision.(If you claim a disability under the Americans with Disabilities Act (ADA) and need an accommodation for the interview, please advise a member of the Personnel Department staff at 407/539-6255 or 407/539-6218).
- D. The Personnel Department will notify all applicants not selected for the position by email if one provided, or mail.

4. **TESTING POLICY:** Some positions may require a job related test be administered as part of the selection process.

5. COMPLETING THE APPLICATION FORM:

- A. Answer all questions on the application, giving complete answers to all questions.
- B. It is important that you include the month and date in your employment history. Failure to do so may cause disqualification of your application. Please provide information on all positions held for the last ten (10) years (where applicable).
- C. The City of Maitland reserves the right to conduct a background search at anytime to verify all answers on the application; falsification of any item is cause for disqualification of application and/or termination.
- D. If you wish to submit a resume with your application, please list all information of the previous Employer(s) on the "Work Experience" section of the application, you may insert "see resume" only on the "Work Experience" portion after the employer's information all other questions have been completed.

6. **SPECIAL REQUIREMENTS:** It is your responsibility to clearly indicate on your application or resume if you possess any of the special requirements listed in the job announcement and to present copies of special certificates of licenses at the time of application.

7. **DRIVER'S LICENSE:** For positions which state "must possess and maintain a valid operator or commercial driver's license issued by the State of Florida", "VALID" is defined as an issued license which is not expired nor has, within the past three (3) years, been denied, restricted, revoked, or suspended. Furthermore, a conviction within the last three (3) years for driving while intoxicated, under the influence of narcotics, and/or any serious violation, to include, but not limited to, reckless driving, endangering the lives of others, or racing, are grounds for disqualification in compliance with the requirements of the City's insurer. Suspensions for non-moving violations will be considered on a case-by-case basis. Driver's License checks will be conducted for verification of status.

8. **NOTICE TO FIREFIGHTER AND POLICE OFFICER APPLICANTS:** If you are applying for a position as a certified firefighter or police officer, you must submit copies of substantiating certificates and documents with the application form. If applying on-line, fax copies to 407/539-6282 attention Personnel, or e-mail electronic copies to hr@itsmymaitland.com.

SEEKING EMPLOYMENT WITH THE CITY OF MAITLAND – (CONT'D)

9. **CITY OF MAITLAND IS A DRUG-FREE WORKPLACE:** A job applicant is offered employment conditional upon successfully passing a drug test. Refusal to take the test, or failure to pass the test according to minimum standards, is cause for disqualification. If you become employed with the City, you may be required to again submit to a drug test as requested. Your refusal, or failure to pass the test according to minimum standards, will result in your termination.
10. **BACKGROUND CHECKS:** Your signature on the employment application authorizes the City of Maitland to request criminal conviction records, to include fingerprinting, from State and Federal agencies, and employment and educational information/verification from your existing/previous employers and educational institutions, and credit history check (where applicable). **Have ever been convicted; pleaded guilty; or pleaded nolo contendere to any criminal offense? Yes (initial) or No (initial). If you have ever been convicted; pleaded guilty; or pleaded nolo contendere to any criminal offense, you need to attach a separate attachment sheet giving offense, date, county, state and disposition for each offense. If applying on-line, e-mail criminal history information to hr@itsmymaitland.com, or fax criminal history information to 407/539-6282 attention Personnel.** By placing your signature on the application and not submitting a separate attachment sheet, you are stating that you have never been convicted; pleaded guilty; or pleaded nolo contendere to any criminal offense. A criminal record does not constitute an automatic bar to employment and will be considered only as it relates to the job in question.
11. **E-VERIFY:** Once an applicant is made a conditional job offer, the City uses E-Verify to confirm work authorization with the Social Security Administration (SSA) & the Department of Homeland Security (DHS), with information from the Form I-9.
12. **SOCIAL SECURITY NUMBER:** According to FS 119.071, The City of Maitland is informing you that your social security number may be collected for the purposes of tax reporting; background checks, training, and benefit information. If your social security number is requested, you will be provided in writing the specific federal or state law governing the collection, use or release of your social security number for each purpose for which the City is collecting the number to include whether it is authorized or mandatory.
13. **WAIVER:** As part of condition of employment, if I am offered a position with the City of Maitland I waive my rights to a trial jury as to any disputes regarding my employment with the City. _____ (Initials Required)
14. **E-MAIL ADDRESS REQUIRED:** Employment correspondence will be conducted through e-mail. Please provide your e-mail address: _____

APPLICANT'S STATEMENT & CERIFICATION

I certify that answers given herein are true and complete. A false answer to any question(s) in this application or interview(s) may be grounds for non-selection. In the event of employment, I understand that false or misleading information given may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

I authorize investigation of all statements in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active only for the vacant position applied for. If there is more than one vacant position, a separate application for each is required. Applications are accepted only when there is a position vacancy and an announcement is posted.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with the City is of an "at will" nature, which means that the Employee may sever the relationship at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of the City.

I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment.

Your signature below acknowledges that you have read and understand the information and requirements contained on this employment application:

Applicant Signature: _____ Date: _____

CITY OF MAITLAND RELEASE FORM



I hereby authorize any employee or authorized representative bearing this release, or copy thereof, to obtain any information in your files pertaining to my employment records including, but not limited to, achievement, attendance, personal history, disciplinary records, and criminal history records. I hereby direct you to release such information upon request of the bearer. This release is executed with full knowledge and understanding such information, as the custodian of such records, and employer, education institution, credit history (where applicable) including its officers, employees, and related personnel, both individually and collectively, from any and all liability for compliance with this authorization and request to release information, or any attempt to comply with it.

I acknowledge that I am not required to sign this release, however, failure to do so will result in the discontinuation of my application process and my application will no longer be considered for review.

A photocopy of this form will be as effective as the original.

Applicant's Name (Please print)

Date

Applicant's Signature

Applicant's Full Address

City of Maitland

**EQUAL EMPLOYMENT OPPORTUNITY SURVEY
FOR THE POSITION OF**

(Please fill in the position for which you are applying)

NAME: _____

The following information is requested for Equal Employment Opportunity record keeping and reporting compliance purposes only as specified by Title VII of the Civil Rights Act of 1964, as amended by the Equal employment Opportunity Act of 1972, Section 709c.

THIS INFORMATION WILL NOT BE USED TO EVALUATE YOUR APPLICATION, AND IS VOLUNTARY.

SEX: (Check One) _____ Male _____ Female

NATIONAL ORIGIN: (Check One)

_____ **CAUCASIAN** (not of Hispanic origin)

_____ **BLACK** (not of Hispanic origin)

_____ **HISPANIC**

_____ **AMERICAN INDIAN** or **ALASKAN NATIVE**

_____ **ASIAN** or **PACIFIC ISLANDER**

_____ **OTHER** (please specify) _____



**THANK YOU FOR YOUR INTEREST
IN SEEKING EMPLOYMENT WITH THE
CITY OF MAITLAND**