Complete all information within this application in its entirety.
Type or print in ink.
All information provided will be a public record and will be released upon request, unless exempt or confidential.
Specify the position for which you are applying. (Note: A separate application must be submitted for each vacancy. Photocopies are acceptable.)
Submit application to the People First Service Center, fax: (888) 403-2110, no later than 11:59 PM (EST) on the announced deadline date.
Sign your name in the Certification Section (page 4). All information you submit is subject to verification.

**Where to Find Vacancy Information:**
- On the Internet: https://peoplefirst.myflorida.com
- One Stop Career Centers - Consult your local telephone directory or visit http://www.employflorida.com
- State Agency Personnel Offices

**GENERAL INSTRUCTIONS FOR COMPLETION OF APPLICATION:**

**How do we contact you?**

**Name**

**People First Employee ID Number (if any)**

**Mailing Address**

**City**

**County**

**State**

**Zip Code**

**Phone**

**Alternate Phone**

**E-mail Address**

**EDUCATION**

**HIGH SCHOOL:**

**NAME / LOCATION OF SCHOOL**

**RECEIVED:**

[ ] Diploma [ ] Other (specify) [ ] None

**YOUR NAME, IF DIFFERENT WHILE ATTENDING SCHOOL:**

[ ]

**COLLEGE, UNIVERSITY OR PROFESSIONAL SCHOOL:** (TRANSCRIPTS MAY BE REQUIRED)

<table>
<thead>
<tr>
<th>NAME OF SCHOOL</th>
<th>LOCATION</th>
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<tbody>
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<thead>
<tr>
<th>DATES OF ATTENDANCE (MONTH / YEAR)</th>
<th>CREDIT HOURS EARNED</th>
<th>MAJOR / MINOR COURSE OF STUDY</th>
<th>TYPE OF DEGREE EARNED</th>
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<tbody>
<tr>
<td>FROM TO</td>
<td>QTR SEM</td>
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</table>

**YOUR NAME, IF DIFFERENT WHILE ATTENDING SCHOOL:**

[ ]

**JOB-RELATED TRAINING OR COURSE WORK:** (VOCATIONAL, TRADE, GOVERNMENTAL, BUSINESS, ARMED FORCES, ETC.)

<table>
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<tr>
<th>NAME OF SCHOOL</th>
<th>LOCATION</th>
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<tr>
<th>DATES OF ATTENDANCE (MONTH / YEAR)</th>
<th>CREDIT HOURS EARNED</th>
<th>COURSE OF STUDY</th>
<th>TRAINING COMPLETED</th>
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<tbody>
<tr>
<td>FROM TO</td>
<td>CLASS CLOCK</td>
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<td>YES NO</td>
</tr>
</tbody>
</table>

**YOUR NAME, IF DIFFERENT WHILE ATTENDING SCHOOL:**

[ ]

**LICENSURE, REGISTRATION, CERTIFICATION** (EXAMPLES: Teacher Certification, RN, LPN, PE, CPA, etc.)

**LICENSE, REGISTRATION OR CERTIFICATION:**

<table>
<thead>
<tr>
<th>LICENSE, REGISTRATION OR CERTIFICATION</th>
<th>Number</th>
<th>Date Received</th>
<th>Expiration Date</th>
<th>State Licensing Agency</th>
</tr>
</thead>
<tbody>
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</table>
PERIODS OF EMPLOYMENT

Describe all work experience in detail, beginning with your current or most recent job. Include military service (indicate rank), internships and job-related volunteer work, if applicable. Indicate number of employees supervised. Use a separate block to describe each position or gap in employment. If needed, attach additional sheets, using the same format as on the application. All information in this section must be completed. Resumes may be attached to provide additional information.

1 Name of Present or Last Employer: ____________________________________________________________
   Address: ________________________________________________________________________________
   Supervisor’s Name: _______________________________________________________________________
   Phone No.: (______) _____________________________________________________________________
   FROM: __/__/____ TO: __/__/____ HOURS PER WEEK: __________ (_________________________)
   Duties and Responsibilities: ________________________________________________________________________________________________________________
   ______________________________________________________________________________________
   ______________________________________________________________________________________
   ______________________________________________________________________________________
   ______________________________________________________________________________________
   ______________________________________________________________________________________
   Reason For Leaving: _____________________________________________________________________

2 Name of Next Previous Employer: _______________________________________________________________________
   Address: ________________________________________________________________________________
   Supervisor’s Name: _______________________________________________________________________
   Phone No.: (______) _____________________________________________________________________
   FROM: __/__/____ TO: __/__/____ HOURS PER WEEK: __________ (_________________________)
   Duties and Responsibilities: ________________________________________________________________________________________________________________
   ______________________________________________________________________________________
   ______________________________________________________________________________________
   ______________________________________________________________________________________
   ______________________________________________________________________________________
   ______________________________________________________________________________________
   Reason For Leaving: _____________________________________________________________________

3 Name of Next Previous Employer: _______________________________________________________________________
   Address: ________________________________________________________________________________
   Supervisor’s Name: _______________________________________________________________________
   Phone No.: (______) _____________________________________________________________________
   FROM: __/__/____ TO: __/__/____ HOURS PER WEEK: __________ (_________________________)
   Duties and Responsibilities: ________________________________________________________________________________________________________________
   ______________________________________________________________________________________
   ______________________________________________________________________________________
   ______________________________________________________________________________________
   ______________________________________________________________________________________
   ______________________________________________________________________________________
   Reason For Leaving: _____________________________________________________________________
Name of Next Previous Employer: ____________________________________________

Address: ________________________________________________________________

Your Job Title: __________________________________________________________

Supervisor’s Name: ______________________________________________________

Phone No.: (_____) __________________________

FROM: __/__/____ TO: __/__/____ HOURS PER WEEK: ______ (_____) __________________________

Duties and Responsibilities:
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

Reason For Leaving: _____________________________________________________

If needed, attach additional sheets, using the same format as on the application. Resumes may be attached to provide additional information.
KNOWLEDGE / SKILLS / ABILITIES (KSAs)
List KSAs you possess and believe relevant to the position you seek, such as operating heavy equipment, computer skills, fluency in language(s), etc.

________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________

EXEMPTION FROM PUBLIC RECORDS DISCLOSURE
ARE YOU A CURRENT OR FORMER LAW ENFORCEMENT OFFICER, OTHER COVERED EMPLOYEE**, OR THE SPOUSE OR CHILD OF ONE, WHOSE INFORMATION IS EXEMPT FROM PUBLIC RECORDS DISCLOSURE UNDER SECTION 119.071(4)(d), FLORIDA STATUTES (F.S.)? □ YES □ NO
**Other covered jobs include but are not limited to: correctional and correctional probation officers, firefighters, certain judges, assistant state attorneys, state attorneys, assistant and statewide prosecutors, personnel of the Department of Revenue or local governments whose responsibilities include revenue collection and enforcement or child support enforcement, and certain investigators in the Department of Children and Families [see § 119.071.F.S.].

BACKGROUND INFORMATION
HAVE YOU EVER BEEN CONVICTED OF A FELONY OR A FIRST DEGREE MISDEMEANOR? □ YES □ NO
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 nature, job-relatedness, severity and date of the offense in relation to the position for which you are applying are considered [see §112.011, F.S.]

CITIZENSHIP
The state of Florida hires only U.S. citizens and lawfully authorized alien workers. You will be required to provide identification and either proof of citizenship or proof of authorization to work in the U.S.

1. ARE YOU A U.S. CITIZEN? □ YES □ NO
2. IF NO, ARE YOU LEGALLY AUTHORIZED TO ACCEPT EMPLOYMENT WITH THE SPECIFIC HIRING AUTHORITY TO WHICH YOU ARE APPLYING? □ YES □ NO

RELATIVES
TO YOUR KNOWLEDGE, DO YOU HAVE ANY RELATIVES WORKING IN THIS AGENCY? □ YES □ NO

SELECTIVE SERVICE SYSTEM REGISTRATION
Section 110.1128, Florida Statutes, prohibits employment by the State (including re-hire after a break in service) of any male born after October 1, 1962, who failed to register with the Selective Service System, under the provisions of the U.S. Military Selective Service Act, during the person’s period of eligibility (ages 18 through 25). Additionally, if currently employed by the State, this law prohibits the promotion of such person.

IF YOU ARE A MALE BORN AFTER OCTOBER 1, 1962, HAVE YOU REGISTERED WITH THE SELECTIVE SERVICE OR DO YOU HAVE PROOF OF AN EXEMPTION FROM THIS REQUIREMENT (DOCUMENTATION MAY BE REQUIRED)? □ YES □ NO □ Not Applicable

CERTIFICATION
I am aware that any omissions, falsifications, misstatements, or misrepresentations above may disqualify me for employment consideration and, if I am hired, may be grounds for termination 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 employment by employers, schools, law enforcement agencies, and other individuals and organizations to investigators, personnel staff, and other authorized employees of Florida state government for employment purposes. This consent shall continue to be effective during my employment if I am hired. I understand that applications submitted for state employment are public records. I certify that to the best of my knowledge and belief all of the statements contained herein and on any attachments are true, correct, complete, and made in good faith.

SIGNATURE: ____________________________ DATE: ____________________________
YOUR NAME: ____________________________________________

POSITION TITLE FOR WHICH YOU ARE APPLYING: ____________________________

POSITION NUMBER: ____________________________

VETERANS’ PREFERENCE INFORMATION: (Career Service positions only) For the purposes of appointments, retention, reinstatement and reemployment, Veterans’ Preference ensures that veterans and eligible spouses of veterans are given consideration at each step of the selection process. However, preference does not guarantee that a veteran or the eligible spouse of a veteran will be the candidate selected to fill the position. 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 five 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 service-connected disability, or the spouse of a veteran missing in action, captured, or forcibly detained or interned in the line of duty 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 unmarried widow or widower of a veteran who died of a service-connected disability, or

5. A veteran who has served in a qualifying campaign or expedition for which a campaign badge or expeditionary medal has been authorized.

The receipt of a campaign medal is not required, only service during a wartime period. Wartime periods are defined in §1.01, F.S. Veterans’ Preference may only be given to non-state employees or current state employees applying to positions outside their current agency or political subdivision. Veterans’ Preference is only available to Florida residents.

A DD214 or comparable document which serves as a certificate of release or discharge and any other required supporting documentation must be furnished at the time of application. Please fax supporting documentation to the People First Service Center at (888) 403-2110 by the closing date of the advertisement. Be sure to include the position number for which you are applying. In addition to the DD214, 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. Under Florida law, preference in appointment shall be given first to those persons in Categories 1 and 2 and then to those in Categories 3, 4 and 5.

If a qualified applicant claiming Veterans’ Preference for a vacant position is not selected, he/she may file a complaint with the Florida Department of Veterans’ Affairs, 11351 Ulmerton Road, Largo, FL 33778. 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.)

ARE YOU CURRENTLY EMPLOYED WITH THE AGENCY TO WHICH YOU ARE CURRENTLY APPLYING?  ☐ YES  ☐ NO

ARE YOU A RESIDENT OF THE STATE OF FLORIDA?  ☐ YES  ☐ NO

HAVE YOU RECEIVED A PROMOTIONAL APPOINTMENT IN A CAREER SERVICE POSITION, SUBSEQUENT TO ACTIVE MILITARY SERVICE, WITH THE AGENCY TO WHICH YOU ARE CURRENTLY APPLYING?  ☐ YES  ☐ NO

This section SHOULD be removed prior to the selection process.

EEO SURVEY  Although the following information is not mandatory, it is requested to aid the State of Florida in its commitment to Equal Employment Opportunity, Affirmative Action and to meet federal reporting requirements. Refusal to answer will not result in adverse treatment of any applicant. Applicants who believe they have been discriminated against may file a complaint with the Florida Commission on Human Relations, 2009 Apalachee Parkway, Tallahassee, Florida 32301.

RACE/ ETHNICITY (Please identify both Race and Ethnicity)

Race (CHECK ONLY ONE):

☐ White  ☐ Black/African American  ☐ Asian
☐ Native Hawaiian/Other Pacific Islander  ☐ American Indian/Alaska Native  ☐ 2 or more races

Ethnicity (CHECK ONLY ONE):

☐ Hispanic or Latino  ☐ Not Hispanic or Latino

SEX:  ☐ MALE  ☐ FEMALE

DATE OF BIRTH: ____________________________

POSITION NUMBER: ____________________________

POSITION TITLE FOR WHICH YOU ARE APPLYING: ____________________________
**Employment with the State of Florida**

Note: This hard copy of the State of Florida employment application is to be used only if you are unable to use the online application process at https://jobs.myflorida.com/index.html

**State Government Personnel Structure**

Florida state government 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.

Employees with the State of Florida fall into a variety of different and autonomous personnel systems each with their own set of rules and regulations, collective bargaining agreements, and wage and benefit packages. The State Personnel System, comprised of employees in the Career Service, Selected Exempt Service and Senior Management Service pay plans, is the largest of these systems and is the focus of this narrative. The State of Florida employment application is used to apply for vacancies within the State Personnel System.

Most state jobs are in the Career Service pay plan. The Career Service provides uniform pay, job classification, benefits and recruitment for the majority of non-managerial jobs within state agencies. The Senior Management Service (SMS) includes upper management and policy-making jobs. Middle management, such as bureau chiefs, professional jobs, such as physicians and attorneys, and supervisory jobs are included in the Selected Exempt Service. Employees can move between agencies without any loss of state benefits.

Temporary jobs are funded by Other Personal Services (OPS) appropriations. OPS employees receive an hourly wage but no benefits such as insurance, leave, or retirement.

Non-State Personnel System agencies are agencies in which jobs do not fall under the Career Service, Selected Exempt Service or Senior Management Service pay plans and their employment procedures may differ. These employers may or may not accept the State of Florida employment application. Additionally, their job titles and salaries may not be comparable to those in the State Personnel System.

**How Candidates are Selected**

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. Job-related criteria are used 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.

**How to Search for Vacancies**

Individual state agencies are responsible for announcing their job vacancies and making hiring decisions. Generally, agencies accept job applications for advertised vacancies only. However, agencies may accept applications for certain positions on a continuous basis. A completed State of Florida employment application is required for each job vacancy to which you apply.

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

- Access the People First job information web site on the Internet at: [https://jobs.myflorida.com](https://jobs.myflorida.com)
- Contact individual State Personnel System agencies directly for information regarding their employment opportunities.
- Contact a Florida One Stop Career Center for job information on and other employment opportunities. To locate the office nearest you, check your telephone directory under “Workforce One Stop Career Center” or visit: [http://www.employflorida.com](http://www.employflorida.com)

Completed applications should be submitted by fax to the People First Service Center at (888) 403-2110.

**How to Market Yourself**

Prior to completing an application for any job, gather specific information about the duties of the job and relevant knowledge, skills and abilities required by carefully reviewing the job vacancy announcement or by contacting the employing agency, if necessary.

Use this information to ensure your application, cover letter, resume and other supporting materials address how your experience and education fulfill these requirements.

Note: This hard copy of the State of Florida employment application is to be used only if you are unable to use the online application process at https://jobs.myflorida.com/index.html