



# THE VILLAGE OF NORTH PALM BEACH

## APPLICATION FOR EMPLOYMENT

FOR OFFICE USE ONLY	
Work Location _____	Rate _____
Position _____	Date _____
Resume Received _____	

Position(s) applied for \_\_\_\_\_ Date of application \_\_\_\_\_

P E R S O N A L	Last Name                      First                      Middle                      Home Telephone/Area Code
	Present Street Address                      Apt.                      Business Telephone/Area Code
	City, State, Zip                      Social Security Number
	Were you previously employed by us: <input type="checkbox"/> Yes <input type="checkbox"/> No                      Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, when? _____                      May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Would you work full-time? _____ Part-time? _____                      Date available for work: _____
	If you are under 18 years of age, can you provide required proof of you eligibility to work? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? (Proof of citizenship or immigration status will be required upon employment) <input type="checkbox"/> Yes <input type="checkbox"/> No
	Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, state the court, nature of offense, disposition of case and date: _____
	In case of accident notify: _____ Telephone/Area Code: _____ Address: _____ Relationship: _____
	Members of your family employed by the Village of North Palm Beach (including in-laws): _____

E D U C A T I O N	School	Name and Location of School	Course of Study	No. of Years Completed	Did you Graduate?	Degree or Diploma
	High School					
	Certifications/ Business/Trade /Technical					
	College					
	Graduate/Ph.D.					

**WE ARE AN EQUAL OPPORTUNITY EMPLOYER**

# EMPLOYMENT

Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer. (Last 10 Years)

1	Company Name	Telephone/Area Code
	Address	Employed - (month and year) From: _____ To _____
	Name of Supervisor	Weekly Pay Start: _____ Last: _____
	State Job Title and Describe Your Work	Reason for Leaving

2	Company Name	Telephone/Area Code
	Address	Employed - (month and year) From: _____ To _____
	Name of Supervisor	Weekly Pay Start: _____ Last: _____
	State Job Title and Describe Your Work	Reason for Leaving

3	Company Name	Telephone/Area Code
	Address	Employed - (month and year) From: _____ To _____
	Name of Supervisor	Weekly Pay Start: _____ Last: _____
	State Job Title and Describe Your Work	Reason for Leaving

4	Company Name	Telephone/Area Code
	Address	Employed - (month and year) From: _____ To _____
	Name of Supervisor	Weekly Pay Start: _____ Last: _____
	State Job Title and Describe Your Work	Reason for Leaving

We may contact the employers listed above unless you indicate those you do not want us to contact.	<b><u>DO NOT CONTACT</u></b>
Employer Number(s) _____	Reason _____

<b>MILITARY</b>	Did you serve in the U.S. Armed Forces? Yes <input type="checkbox"/> No <input type="checkbox"/>	If "Yes," in what Branch and attach a copy of DD214.
-----------------	---	--

**SKILLS & QUALIFICATIONS**

Summarize any training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

---



---



---



---

**REFERENCES**

(Not Village employees or relatives)

NAME	AREA CODE/ TELEPHONE	YEARS KNOWN
	( )	
	( )	
	( )	

**COMMENTS**

(Ask for an additional page, if necessary)

---



---



---



---

**CERTIFICATION AND RELEASE**

This application form is intended for use in evaluating your qualifications for employment. This is not an employment contract. False or misleading statements during the interview and/or on this form are grounds for terminating the application process or, if discovered after employment, terminating employment.

The Employer does not unlawfully discriminate in employment, and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by Local, State, or Federal law. All qualified applicants will receive consideration without discrimination because of sex, marital status, race, age, creed, national origin or the presence of disabilities. Disclosure of a criminal record will not necessarily disqualify you from employment, as the nature of the offense, date, and the position for which you are applying will also be considered.

I understand it is this Company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I further understand that as an applicant or employee of the Village of North Palm Beach, I may be required to take a polygraph examination, and by signature below, I hereby give my consent. Refusal to take a polygraph examination shall be grounds for non-acceptance of an applicant or dismissal from employment.

I certify that the facts set forth on this application are true and correct to the best of my knowledge, and that falsified statements shall be grounds for non-acceptance of an applicant or dismissal from employment.

I authorize the Village of North Palm Beach to investigate my personal, financial, and credit history through agencies or sources of its choice.

**SIGNATURE:****X****DATE:**

\_\_\_\_\_

**FOR EMPLOYER'S USE ONLY**

<b>INTERVIEW RESULTS</b>				
Arrange interview	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Remarks _____ _____				
Employed	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Date of Employment _____	Weekly Rate/Salary _____
Job Title _____		Department _____		
By _____ Name and Title		Date _____		

<b>REFERENCE CHECK</b>		
No.	Person Contacted	Results
<b>1</b>		
<b>2</b>		
<b>3</b>		

<b>TEST RESULTS</b>			
Tests Administered	Date	Raw Score	Analysis & Comments

<b>PRE-EMPLOYMENT RESULTS</b>		
Background Check	Result Date	By _____
Physician	Date	Comments



**NOTICE**  
**COLLECTION AND USE OF YOUR SOCIAL SECURITY NUMBER**  
**BY THE VILLAGE OF NORTH PALM BEACH, FLORIDA**

PURSUANT TO SECTION 119.071(5)(a)3., *FLORIDA STATUTES*, THE VILLAGE OF NORTH PALM BEACH IS PROVIDING YOU WITH THE FOLLOWING STATEMENT AS A RESULT OF THE VILLAGE'S REQUEST FOR YOUR SOCIAL SECURITY NUMBER. YOUR SOCIAL SECURITY NUMBER IS BEING COLLECTED BY THE VILLAGE OF NORTH PALM BEACH EITHER BECAUSE SUCH REQUEST IS SPECIFICALLY AUTHORIZED BY LAW OR ITS USE IS IMPERATIVE TO THE PERFORMANCE OF THE VILLAGE'S DUTIES AND RESPONSIBILITIES UNDER LAW. YOUR SOCIAL SECURITY NUMBER WILL NOT BE USED FOR ANY PURPOSE OTHER THAN AS PROVIDED BELOW:

**THE VILLAGE OF NORTH PALM BEACH, FLORIDA, COLLECTS YOUR SOCIAL SECURITY NUMBER FOR THE FOLLOWING PURPOSES: CLASSIFICATION OF ACCOUNTS; IDENTIFICATION AND VERIFICATION; CREDIT WORTHINESS; BILLING AND PAYMENTS; DATA COLLECTION; RECONCILIATION; TRACKING; BENEFIT PROCESSING; AND TAX REPORTING. SOCIAL SECURITY NUMBERS ARE ALSO USED AS A UNIQUE, NUMERIC IDENTIFIER AND MAY BE USED FOR SEARCH PURPOSES.**



The Village of North Palm Beach  
Department of Human Resources  
501 U.S. Highway # 1  
North Palm Beach, FL 33408

## Background Disclosure Statement

By this document, the Village of North Palm Beach discloses to you that a consumer report may be obtained for employment purposes as part of the pre-employment background investigation and at any time during your employment. Please sign below to signify receipt of the foregoing disclosure.

\_\_\_\_\_  
Applicant's Name Printed

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

## Notification and Authorization To Conduct Background Investigation

I hereby authorize Village of North Palm Beach or its agents SINGLESOURCE SERVICES CORPORATION to investigate my background to determine any and all information of concern to my record, whether same is of record or not, and I release employers and persons named in my application from all liability for any damages on account of his/her furnishing said information.

Additionally, you are hereby authorized to make any investigation of my personal history, including, but not limited to a credit check, driver's license history, educational background, military record, criminal records and more through an investigative or credit agency or bureau of your choice I authorize the release of this information by the appropriate agencies to the investigating service. I understand that this may include a workers compensation claims search after a conditional job offer has been made. I also understand that I may be required to take a drug test before or during employment.

This authorization, in original or copy form shall be valid for this and for any future reports and updates that may be requested.

PLEASE PRINT CLEARLY

FULLNAME: \_\_\_\_\_ SSN \_\_\_\_\_

OTHER NAMES OR SSN USED: \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_  
Street City State Zip

PHONE: (\_\_\_\_) \_\_\_\_\_

LIST ALL ADDRESSES FOR PAST 7 YEARS: (show others on back and check here \_\_\_\_\_ )

\_\_\_\_\_  
Street Address City State Zip DATES

\_\_\_\_\_  
Street Address City State Zip DATES

DRIVER'S LICENSE# \_\_\_\_\_ STATE \_\_\_\_\_ DOB \_\_\_\_ / \_\_\_\_ / \_\_\_\_

(dob is optional and is only used for identification purposes in screening inquiries)

\*\*\*MAY WE CONTACT YOUR CURRENT EMPLOYER? \_\_\_\_\_ YES \_\_\_\_\_ NO

\*\*\*HAVE YOU EVER BEEN CONVICTED OF A CRIME? \_\_\_\_\_ YES \_\_\_\_\_ NO

This includes but is not limited to pleas of guilty, nullo contendere, no contest, adjudication withheld, and pre trial intervention programs. If YES show details including date, charge, county, disposition on rear.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

For Village of North Palm Beach Office Use

Statewide Criminal (State _____)	Drug Screen - Offsite	Employment Verification (attach job application)
County Criminal (County _____)	Discovery	References (attach job application)
Residential Trace w/7 Year Criminal	Credit Check	Education Verification
Residential Trace	Driving History	Professional License

This page for additional information. Please print.