

Application for Employment

Human Resources: 2330 Nebraska Avenue, Palm Harbor, FL 34683

Please print LEGIBLY in black or blue ink only.

PLEASE COMPLETE PAGE	 ES 1-4.		DATE		
Nama					
Name		First	Middle		Maiden
Present address					
	ımber	Street	City		State Zip
How long at present address?			Social Security No.		
Telephone ()			E-Mail		
If under 18, please list age					
Applying to: □Palm Harbo	or Library □CSA TI	he Centre	□East Lake Community	-	Lake Recreation
Position applied for (1)	Days/hours available to work No Pref Thur				
Salary desired (2)			Mon	Fri	
(Be specific)			Wed	Sat Sun	
How many hours can you work weekly? Can you work nights?					
Employment desired	FULL-TIME ONLY	□PA	RT-TIME ONLY	JLL- OR PART-T	IME
Date available to start work?					
	=======================================				
TYPE OF SCHOOL NA	ME OF SCHOOL	LOCATION		NUMBER OF	MAJOR &
		(Comp	olete mailing address)	YEARS COMPLETED	DEGREE
High School				OOM EETED	
College					
Bus. or Trade School					
Professional School					
					I,
HAVE YOU EVER BEEN CO	ONVICTED OF A FEI	ONY?	□ No □ Yes		
If yes, please explain.				•	
ii yes, piease explairi.					
DO YOU HAVE A DRIVER'S	S LICENSE?	s 🗆 No			
What is your means of trans	portation to work? _				
Driver's license number	Star	te of issue _	Derator	☐ Commercial	(CDL) □Chauffeur
Expiration date					
Have you had any accidents		e vears?	☐ Yes ☐ No	How many?	
	Have you had any moving violations during the past three years? ☐ Yes ☐ No How many?				

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

2/02/17/0/0///					
Military					
HAVE YOU EVER BEEN IN THE ARMED FORCES?	□ Yes □ No				
ARE YOU NOW A MEMBER OF THE NATIONAL GUAR	D?				
Specialty Da	ate Entered Discharge Date				
References					
Please list two references other than relatives or previous employers.					
Name	Name				
Position					
Company	Company				
Address	Address				
Telephone ()	Telephone ()				
Email	Email				
Use the space below to summarize any additional inform	nation necessary to describe your full qualifications for the specific				
position for which you are applying.					
(6)					

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

If not, who did?

Work Please list your work experience for the Experience If you were self-employed, give firm name	e past five years beginning me. Attach additional she	with your most recent jets if necessary.	job held.	
Name of employer Address	Name of last supervisor	Employment dates	Pay or salary	
City, State, Zip Code Phone number		From	Start	
Filone number		То	Final	
	Your last job title			
Reason for leaving (be specific)				
List the jobs you held, duties performed, skills used or le company.	arned, advancements or pr	omotions while you wo	rked at this	
Name of employer Address	Name of last supervisor	Employment dates	Pay or salary	
City, State, Zip Code Phone number		From	Start	
Thorse Hallison		То	Final	
	Your Last Job Title			
Reason for leaving (be specific)				
List the jobs you held, duties performed, skills used or le company.	arned, advancements or pr	omotions while you wo	rked at this	
Name of employer Address	Name of last supervisor	Employment dates	Pay or salary	
City, State, Zip Code Phone number		From	Start	
. Hono Hambor		То	Final	
	Your last job title			
Reason for leaving (be specific)				
List the jobs you held, duties performed, skills used or le company.	earned, advancements or pr	omotions while you wo	rked at this	
	l No			
Did you complete this application yourself? Yes	l No			

AGREEMENT (PLEASE READ CAREFULLY BEFORE SIGNING)

I certify that all the information on this application is accurate and complete to the best of my knowledge, and I understand that misleading or false statements will constitute sufficient cause for refusal of hire or termination of my employment.

I understand that neither the acceptance of this application nor the subsequent entry into any type of employment relationship with Palm Harbor Community Services Agency creates an actual or implied contract of employment. I understand that, if I accept employment with Palm Harbor Community Services Agency, it will be on an at-will basis. This means that either Palm Harbor Community Services Agency or I have the right to terminate the employment relationship at any time, for any reason, with or without cause.

I agree to submit to drug and alcohol testing, if requested by Palm Harbor Community Services Agency. I release Palm Harbor Community Services Agency, and its employees, plus other persons or companies, from any and all liability arising out of, or related in any way, to such testing.

I authorize Palm Harbor Community Services Agency to investigate information concerning my education, employment experiences and all other aspects of my background relevant to my proposed employment. I release Palm Harbor Community Services Agency and its employees from all liability arising from such investigation.

	D /
Signature of applicant	Date:

Palm Harbor Community Services Agency is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with Palm Harbor Community Services Agency depends solely on your qualifications.