

#### **Town of Palm Beach Shores**

247 Edwards Lane Palm Beach Shores, FL 33403 (561)844-3457 Fax: (561)863-1350

#### **Application for Employment**

THE TOWN OF PALM BEACH SHORES IS AN EQUAL OPPORTUNITY EMPLOYER AND A DRUG FREE WORKPLACE Applicant Name: Personal Information Name (Last, First, MI) Street address City, State, Zip Home phone number E-mail address Social Security number Driver's license number/state/expiration (if job involves any driving) **Employment Desired** Position applied for How did you hear about this position? Date available for work Desired hours (full time, part time, etc.) **Education (attach copies of degrees or certificates)** Total Years Name and Address of Course of Degree/ School of Study **Diploma** Study High Today's Date: School Undergraduate College Graduate/ Professional Other (Specify) CITIZENSHIP: The Town of Palm Beach Shores hires only U.S. Citizens and lawfully authorized alien workers. If a conditional offer of employment is made, you will be required to provide identification and proof of citizenship or authorization to work in the U.S. Are you a U.S. citizen or YES NO are you legally authorized to work in the U.S.? Have you ever been convicted of a felony? YES NO If yes, state the court, nature of offense, disposition of case and date: NOTE: The type of offense and the nature of the position applied for are the only factors considered. Crime conviction check will be conducted.

Er	Employment Application					
En	ployment History					
Acc	t below all present and past employers over count for all periods of unemployment. Yo tact your current employer? YES 1	u must compl				
1.	Employer (current ☐ Yes ☐ No)	Start Date	End Date	Key job functions of final position		
	Address			1.		
	City, State, Zip	Starting Salary	Ending Salary	2.		
	Phone number			3.		
	Job position(s)	•		4.		
	Supervisor(s)					
Reason(s) for leaving						
	What value did you add to this company	or its custome	rs?			
2.	Employer	Start Date	End Date	Key job functions of final position		
	Address		2	1.		
	City, State, Zip	Starting Salary	Ending Salary	2.		
	Phone number			3.		
	Job position(s)			4.		
	Supervisor(s)					
	Reason(s) for leaving					
	What value did you add to this company or its customers?					

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## **Employment History**

3.	Employer	Start Date	End Date	Key job functions of final position		
	Address	Date	Date	Key job functions of final position		
				1.		
	City, State, Zip	Starting	Ending			
	Phone number	Salary	Salary	2.		
	Those number			3.		
	Job position(s)					
		4.				
	Supervisor(s)					
	Reason(s) for leaving					
	What value did you add to this company or	its custome	ers?			
4.	Employer	Start	End	T		
	Address	Date	Date	Key job functions of final position		
	Address			1.		
	City, State, Zip	Starting	Ending			
		Salary	Salary	2.		
	Phone number			2		
				3.		
	Ich position(s)					
	Job position(s)			4.		
	Job position(s)  Supervisor(s)			4.		
	Supervisor(s)			4.		
				4.		
	Supervisor(s)  Reason(s) for leaving	its custome	ers?	4.		
	Supervisor(s)	its custome	ers?	4.		
	Supervisor(s)  Reason(s) for leaving	its custome	ers?	4.		
	Supervisor(s)  Reason(s) for leaving	its custome	ers?	4.		

<b>Employment Application</b>					
Additional Information					
List any seminars, classes or other education not listed previously which may help qualify you for this position:					
	• • • ,.	1 66	1 11 7		
List any professional, trade, business or civic activities and offices held. You may exclude membership that would reveal gender, race, religion, national origin, ancestry, age, disability or any other protected status:					
List any languages other than English that you can speak, read or write that could be of benefit to the position applied for:					
	Fluent	Good		Fair	
Speak					
Read					
Write					
Identify formal job training that	relates to this po	sition:			
Identify what skills or certificati	on you possess re	elated to this posi	ition:		
Describe what you believe are the	ne most unique fe	eatures of your w	ork histo	ory:	
<b>References:</b> List below three persons not related to you who have knowledge of your work performance within the last 5 years					
Name			Occupation		
Company name	Address				
Telephone	E-mail		Relationship & years acquainted		
NT					
Name		Occupa	ation		
Company name	Address				
Telephone	E-mail		Relationship & years acquainted		
Name		Occupa	ation		
Company name	Address				
Telephone	E-mail		Relatio	nship & years acquainted	

## **Employment Application**

### Please read each statement closely and initial each acknowledging your understanding

-	Signature	Date
	TO BE BOUND BY THEM IF EMPLOYED BY	
	position for which I am qualified is open (unless shire me. I understand that the Town is under no completed application. I further understand that all period during which time the employee is continuously be terminated.	ance of this job application does not mean that a specifically posted) or that the Town has agreed to obligation to hire me as the result of accepting this I positions carry with them a specified probationary nuously evaluated for suitability for the position. It at any time if performance is not satisfactory.  BOVE POLICY STATEMENTS AND AGREE
	checks. By applying for this job, I also authorize criminal background.	al background, references and other background post-hire investigation into my credit, driving and
	Town may terminate the employment relationship Town will respect my right to terminate my emp notice, with or without cause. I further understand	employment will be "at-will", which means that the at any time, with or without cause. Likewise, the loyment at any time by providing a two (2) week d that any prior representation, whether expressed and that no promise or representation contrary to in writing and signed by the Mayor.
	chances for employment and that the answers g knowledge. I further certify that I have personally omission or misstatement of material fact on this	eld any information that might adversely affect my iven by me are true and correct to the best of my completed this application. I understand that any application, or any other document used to secure his application or for immediate discharge if I am discovery.
	contingent upon passing a physical, which inclusafeguard the health of our employees and provide	sition with the Town of Palm Beach Shores is udes a drug test. As part of our commitment to de a safe environment, and to promote a drug free ree Workplace Policy dealing with the problems of
	with all Federal, State and local laws related to te not discriminate against or in favor of any emp religion, color, national origin, physical or mental Federal, State or local laws. PBS will make reas mental limitations of an otherwise qualified emplo- environment that is free of discrimination and u	Opportunity Employer and committed to complying arms and conditions of employment. The Town will ployee or prospective employee because of race, all disability, age or any other status protected by sonable efforts to accommodate those physical or oyee. The Town is committed to providing a work unlawful harassment. Sexual and other unlawful at is demeaning to another person, undermines the rictly prohibited.

# **Employment Application**

For Personnel Department Use Only

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<b>T</b> 1				44.U.A.

1.	Application reviewed on	by
2.	Denial letter sent	
3.	Interview letter sent	
4.	Interview scheduled for	
AD	DITIONAL NOTES:	