



# EMPLOYMENT APPLICATION

**Baker County Board Of Commissioners**  
**55 N. Third Street, Macclenny, FL 32063**

**Position applying for:** \_\_\_\_\_

## EMPLOYEE INFORMATION

Name \_\_\_\_\_

Present Address \_\_\_\_\_  
 Last First Middle  
 Street and No. City/State Zip How long have you lived there?  
 Years Months

Previous Address \_\_\_\_\_  
 Street and No. City/State Zip How long did you live there?  
 Years Months

Telephone No. \_\_\_\_\_ Are you 18 years of age or older?  Yes  No

E-mail Address: \_\_\_\_\_ **Baker County abides by Veterans preference:**

Have you ever worked for Baker County before?  Yes  No **Military service**  Yes  No

If yes, please give dates and position: \_\_\_\_\_

Do you have any friends or relatives working for Baker County Board of Commissioners?  Yes  No

If yes, Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Have you ever been convicted, pled guilty or "no contest" (nolo contendere) to any crime, regardless of whether or not you were adjudicated or if adjudication was withheld, or prosecution deferred?  Yes  No

If Yes, please give date and details of each: \_\_\_\_\_

Have you ever been known by any other names?  Yes  No

If Yes, please give all prior names by which you have been known: \_\_\_\_\_

## PREVIOUS EMPLOYMENT

Please list the names of your present or previous employers in chronological order with present or last employer listed first. Be sure to account for all periods of time including any period of unemployment.

Present or Past Employer:	From	Pay	Position	Reason for leaving
	To		Supervisor	
_____ Address _____ City/State/Zip _____ Telephone _____				
Describe job duties:				

<b>Previous Employer:</b>  _____ Address _____ City/State/Zip _____ Telephone _____	From	Pay	Position	Reason for leaving	
	To		Supervisor		
	Describe job duties:				
<b>Previous Employer:</b>  _____ Address _____ City/State/Zip _____ Telephone _____	From	Pay	Position	Reason for leaving	
	To		Supervisor		
	Describe job duties:				

Have you ever been terminated or asked to resign?  Yes  No If yes, please explain circumstances: \_\_\_\_\_

Please explain fully any gaps in your employment history: \_\_\_\_\_

## EDUCATION

	School Name/Location	Years Completed	Degree	Study or Major
High School				
College/University				
Graduate/Professional				
Trade/Correspondence or Other				

**PERSONAL REFERENCES**

(Any Relatives listed will NOT be considered)

Name	Relationship	Address	Telephone Number

This application will be considered active for a maximum of thirty (30) days. If you wish to be considered for employment after that time, you must reapply.

**I HEREBY CERTIFY** that all of the information that I have provided in this application is true and accurate. I further understand that a criminal background check may be conducted by Baker County and I hereby give my consent for Baker County to complete a criminal background check relating to this Employment Application.

**I UNDERSTAND** that any incorrect or false statements on this Employment Application may result in my application being denied, or my immediate termination if the false statement is discovered after I begin employment.

\_\_\_\_\_ **Date**

\_\_\_\_\_ **Signature of Applicant**

**Baker County is an equal opportunity employer. All applicants are considered for all positions without regard to age, race, color, national origin, religion, sex, sexual orientation, marital or veteran status, medical condition, or disability, or any other legally protected reason.**

**EQUAL OPPORTUNITY EMPLOYER  
APPLICANT'S STATEMENT**

I understand that if I am hired, my employment will be for no definite period, regardless of the period of payment of my wages. I further understand that I have the right to terminate my employment at will at any time with or without notice or reason, and the County has the same right. No one other than the President of the County has authority to modify this relationship or make any agreement to the contrary. Any such modification or agreement must be in writing.

I understand that the County reserves the right to require me to submit to a drug test at any time and also reserves the right to require me to submit to an alcohol test and/or medical examination to the extent permitted by law. I further understand that the County may contact my previous employers and I authorize those employers to disclose to the County all records and other information pertinent to my employment with them. I release my previous employers from any liability as a result of their disclosure of information about me to the County. I also authorize the County to provide truthful information concerning my employment with it to my future prospective employers and I agree to hold it harmless for providing such information.

I further understand that if employed I will be on a 90-day introductory period, and that termination for unsatisfactory performance during that period will not result in any County responsibility for unemployment benefits. I further understand that completion of the introductory period does not confer any expectation of continued employment, and that if employed, my employment will be for no definite period and "at-will."

By signing this application, I certify that all of the information that I provide on this application and in any interview will be true, complete and accurate. I understand that if I am employed and any such information is later found to be false or misleading in any respect, I will be dismissed.

I certify that I have received a written notification that the County may obtain a consumer report or reports on me. I authorize this County to obtain such a report or reports for use in connection with my application for employment and for other employment-related reasons. If hired, this authorization shall remain on file and serve as ongoing authorization for procurement of employment-related consumer reports at any time during my employment. I understand that the term "consumer report" includes, but is not limited to, credit checks, criminal background checks, Department of Motor Vehicle reports, and investigative consumer reports. I authorize the County to conduct electronic inquiry related to my background, including review of all social networking sites and Internet sites and to make adverse decisions as a result of such inquiries. I further understand that the term "investigative consumer report" means a report in which information on my character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with my neighbors, friends, or associates, or with others with whom I am acquainted or who may have knowledge concerning any such items of information.