

Office of the State Attorney, 3rd Judicial Circuit

EMPLOYMENT APPLICATION

Equal Opportunity Employer/Affirmative Action Employer
The State of Florida does not tolerate violence in the workplace.

State Attorney's Office 310 Pine Ave. SW Live Oak, FL. 32064 (386) 362-2320 https://sao3.org/

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Date	Broadband/Class Code	Status
Date Availab	le:	
	Date Availab	_Date Available:

(386) 362-2320 https://sao3.org/				s of Interest: _ n Acceptable S	salary:				
GENERAL INSTRUCTIONS FOR COMPL	ETION OF APPLICATION:	HOW DO WE CO	NTACTV	VI2	ASSESTING.				
Complete all information within this application. Type or print in ink. All information provided will be a public recrequest, unless exempt or confidential. Specify the position for which you are application must be submitted for each vacacceptable.) Limit application to the People First Serial (88) 403-210 no later than 11-59 People First Serial	cord and will be released upon lying. (Note: A separate cancy. Photocopies are	Name People First Employe Mailing Address City Phone E-mail Address			. Alternate P	County	State	Zip Code	
EDUCATION		<u></u>	***************************************	######################################	······			***************************************	***************************************
HIGH SCHOOL: NAME / LOCATION OF SCHOOL		RECEIVED:	Diploma		Other (spec	ify)			None
YOUR NAME, IF DIFFERENT WHILE ATTENDING			50,250,600,600	4516-1254-1255)		Control of the Contro			Anna Anna ann
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LICENSURE, REGISTRATION, CERTIFICATION (EXAMPLES: Florida Bar, RN, LPN, PE, CPA, etc.)

LICENSE, REGISTRATION OR CERTIFICATION:	Number	Date Received	Expiration Date	State Licensing Agency
	<u> </u>	L	L	L

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. Name of Present or Last Employer: ___ Address: ___ _____ Your Job Title: ____ Phone No.: (_____) Supervisor's Name: Duties and Responsibilities: Reason For Leaving: Name of Next Previous Employer: _____ Your Job Title: Address: ___ _____Phone No.: (______) Supervisor's Name: Reason For Leaving: ____ Name of Next Previous Employer: Your Job Title: Address: __ _____Phone No.: (______) Supervisor's Name: Duties and Responsibilities: ___

Reason For Leaving: ____

A Name of Next Previous Employer:		
AR. 4544		
FROM:/	HOURS PER WEEK: (YOUR NAME IF DIFFERENT DURING EMPLOYMENT
Reason For Leaving:		
197256		
Duties and Responsibilities:		YOUR NAME IF DIFFERENT DURING EMPLOYMENT
Reason For Leaving:		
6 Name of Next Previous Employer:		
FROM://		YOUR NAME IF DIFFERENT DURING EMPLOYMENT
Reason For Leaving:		

If needed, attach additional sheets, using the same format as on the application. Resumes may be attached to provide additional information.

Where? Date:	KNOWLEDGE / SKILLS / ABILITIES (KSAs)			
EXEMPTION FROM PUBLIC RECORDS DISCLOSURE ARE YOUR CURRENT OR FORMER LAW ENFORCEMENT OFFICER, OTHER COVERED EMPLOYEE*, OR THE SPOUSE OR CHILD OF ONE, MHOSE INVORMATION IS EXEMPT FROM PUBLIC RECORDS GISCLOSURE UNDER SECTION 119.0714()(6), FLORIDAS TATUTES (FS.)? "Other covered join faults to the control and correctional and correctional problem officers, firefighters, certain judges, assistant state attorneys, attals 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 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 (seed) \$119.071.E.S.]. BACKGROUND INFORMATION HAVE YOU EVER BEEN CONNICTED OF A FELONY OR A FIRST DEGREE MISDEMEANOR? "If YES", what charges?	List KSAs you possess and believe relevant to the position you seek, such as operating heavy equiprocess.	ment, computer skills, fluency	in language(s),	etc.
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Mere 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? Where? Date: HAVE YOU EVER HAD THE ADJUDICATION OF GUILT WITHHELD FOR A CRIME WHICH IS A FELONY OR A FIRST DEGREE MISDEMEANOR? Where? Date: HAVE YOU EVER HAD THE ADJUDICATION OF GUILT WITHHELD FOR A CRIME WHICH IS A FELONY OR A FIRST DEGREE MISDEMEANOR? 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 Florids hires only U.S. citizens and lawfully authorized alien workers. You will be required to provide identification and either proof of discensing or authorization to work in the U.S. 1. ARE YOU A. U.S. CITIZEN? LE PAO, ARE YOU LEGALLY AUTHORIZED TO ACCEPT EMPLOYMENT WITH THE SPECIFIC HIRING AUTHORITY TO WHICH YOU ARE APPLYING? RELATIVES TO YOUR KNOWLEDGE, DO YOU HAVE ANY RELATIVES WORKING IN THIS AGENCY? SELECTIVE SERVICE SYSTEM REGISTRATION SELECTIVE SERVICE SYSTEM REGISTRATION SELECTIVE SERVICE SYSTEM REGISTRATION SELECTIVE SERVICE SYSTEM REGISTRATION FROM THIS REQUIREMENT (DOCUMENTATION MAY BE REQUIRED)? WHITH THE SELECTIVE SERVICE ON YOU HAVE PROOF OF AN EXEMPTION FROM THIS REQUIREMENT (DOCUMENTATION MAY BE REQUIRED)? CERTIFICATION Lam aware that any omissions, falsifications, risistatements, or misrepresentations above may disqualify me for employment consideration and, if Lam hired, may be grounds for termination at a later date. Lunderstand that any information advanced that any information all than priced, may be investigators, but any enhanced and that applications submited for state employment for employment to consideration and, if Lam hired, unay be grounds for termination at a later date. Lunderstand that any information a few may be investigated as allowed, and other nutrivious about the release of i	BACKGROUND INFORMATION	CONTRACTOR OF STREET, ACCUPANT AND ACCUPANT AND ACCUPANT ACCURATE ACCUPANT ACCURATE ACCUPANT ACCURATE		
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Where?			YES	NO
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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)? 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, human resources 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.	RELATIVES			
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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 Hispanic or Latino Asian Native Hawaiian/Other Pacific Islander American Indian/Alaska Native 2 or more races
SEX: MALE FEMALE DATE OF BIRTH: POSITION NUMBER: POSITION TITLE FOR WHICH YOU ARE APPLYING: