

HERNANDO COUNTY PROPERTY APPRAISER

201 Howell Ave., Suite 300, Brooksville, FL 34601-2042

APPLICATION FOR APPOINTMENT

We are an equal opportunity employer, dedicated to nondiscrimination in employment on the basis of race, color, age, religion, sex, national origin, handicap, disability or marital status.

DATE:	Are you 18 Years or Older? Yes No					
NAME:						
	Last	First	Middle			
1	Last	Tilst	Middle			
PERMANENT ADDRES	SS:					
S	Street	City	State	Zip		
PHONE NUMBER:	()	REFERRED BY:				
CELL PHONE NUMBE	CR· (
		County Property Appraise	r please state their name:			
EMPLOYMENT DESIRED						
POSITION:	DAT	E YOU CAN START:	SALARY D	ESIRED:		
Are you employed now?	☐ Yes ☐ No	May we contact	your current employer?	Yes No		
Have you ever applied earlier to the Hernando County Property Appraiser's Office? Yes No Position Applied For: When?						
Are there any days or hours you will <u>not</u> work?						
Are you legally eligible for employment in the United States?						
(If offered employment,	you will be required to pro	ovide documentation to ve	rify eligibility.)			
EDUCATION						
	Name & Location of School	Course of Study	Number of Years Completed	Diploma or Degree Received		
High School	201001			110001100		
College						
Other (including						
Other (including Graduate School)						

APPLICANT INFORMATION

List below all of your employers in the last ten (10) years beginning with your current or most recent employer (use additional pages, if necessary) MONTH, DAY, NAME, ADDRESS & PHONE # POSITION & JOB **SALARY REASON FOR LEAVING OF EMPLOYER DUTIES YEAR** From: To: From: To: From: To: From: To: Did you work for any of these employers under a different name? ☐ Yes □ No If yes, list which employer(s) and under what name(s): Please explain any gaps in your employment history: Have you ever been terminated from employment or asked to resign by an employer? Yes No If yes, please provide company name(s) and details: Have you received any written reprimand or disciplinary suspension during any previous employment? Yes If yes, please explain:

PREVIOUS EMPLOYMENT

OFFICE SKILLS Please check areas in which you are competent							
☐ Calculator ☐ Multi-Line Telephone ☐ Computer ☐ Filing ☐ Spreadsheets/Database ☐ Typing	Office 1 2 3 4	Equipment (Copier, Fax)	Software/Comp 1234	outer Applications			
Licenses or Certificates h	neld by you:						
Professional Membership	os:						
		DRIVER LICENSE					
	ust possess a Florida Drive icles.	, and the position for which r License at the time of hire.					
Have points been assessed			Yes No				
If Yes, how many points?_		•	Tes Tho				
Has your Driver License b	een suspended or revoked	in the past three years?	Yes No				
If yes, for what violations?For what period of time?							
REFERENCES List below the names of three (3) persons not related to you whom you have known at least one (1) year.							
NAME	ADDRESS	PHONE NUMBER	BUSINESS	YEARS ACQUAINTED			

APPOINTMENT APPLICATION CERTIFICATION

I hereby certify that all of the facts and information listed on this Appointment Application are true and complete. I understand that any false, incomplete or misleading information given by me on this application is sufficient cause for rejection of this application. I also understand and agree that any such false, incomplete or misleading information discovered on this application at any time after I am employed may result in my dismissal.

I hereby authorize the Hernando County Property Appraiser to investigate all statements contained in this application, to interview the references and previous employers listed in this application, and to obtain a report from a consumer-reporting agency to be used for employment purposes in accordance with the Fair Credit Reporting Act. I authorize the references and previous employers listed to give the Hernando County Property Appraiser all facts, opinions and evaluations concerning my previous employment and any other information they may have, personal or otherwise, and release all such parties from any liability which may allegedly arise from furnishing such information to the Hernando County Property Appraiser, including, but not limited to, any liability for defamation or invasion of privacy.

If I am offered appointment, I understand that such an offer will be conditioned upon satisfactory results of a background investigation and/or the Hernando County Property Appraiser medical examination or inquiry, including a drug screen test. If then employed, I understand that I will be required to serve a six-month introductory period. I further understand that my appointment and compensation can be terminated, with or without cause or notice, at any time, regardless of the successful completion of my introductory period, at the option of either the Hernando County Property Appraiser or myself. I understand that no supervisor or other representative of the Hernando County property Appraiser other than the Hernando County Property Appraiser has any authority to enter into any agreement for appointment for any specified period of time, or to make any agreement contrary to the foregoing.

I further understand and voluntarily agree as a condition of appointment or my continued appointment, that I may be requested by the Hernando County Property Appraiser to submit to a urinalysis or other drug screen test and that my failure to take such test(s) when requested to do so or unsatisfactory test results will disqualify me from consideration for appointment, or if I am then appointed, may result in my immediate dismissal.

I further understand that if selected for employment, I must furnish a paper social security card before receiving payment of wages or salary and take an oath or affirmation of Allegiance (Loyalty Oath, Florida Statute, Section 876.05).

I understand that I may be asked to work overtime and agree to do so if requested. If I do work overtime, I agree to accept compensatory time off in lieu of overtime pay, at the discretion of the Hernando County Property Appraiser.

I certify that I have read, understand and agree with the above.						
Signature of Applicant	Date					

Revised 7/31/18

AFFIRMATIVE ACTION VOLUNTARY INFORMATION

We are subject to certain government recordkeeping and reporting requirements for the administration of civil rights laws and regulations. To comply with these laws, we invite you to voluntarily self-identify your race or ethnicity. **Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment**. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual.

This information will not be used as the basis for any adverse employment decision.

NameAddressState Zip	First City_	Middle				
Zip						
Phone #	Male Male	Female				
EEO 1 C IEI 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
EEO-1 Self-Identification						
Please check the EEO Identification Group that best applies	s to you:					
Hispanic or Latino – A person of Cuban, Mexican, Puerto	o Rican, South or Central A	American, or other Spanish culture or				
origin, regardless of race. White (Not Hispanic or Latino) – A person having origins in any of the original peoples of Europe, the Middle East or North Africa.						
Black or African American (Not Hispanic or Latino) – A person having origins in any of the black racial groups of						
Africa. Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) – A person having origins in any of the peoples of						
Hawaii, Guam, Samoa, or other Pacific Islands.						
Asian (Not Hispanic or Latino) – A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the						
Philippine Islands, Thailand and Vietnam.						
American Indian or Alaska Native (Not Hispanic or La North and South America (including Central America), an						
Two or more Races (not Hispanic or Latino) – All person						
excluding Hispanic or Latino						
Reasonable Accommodation						
Please advise if you believe there is a reasonable accommodation this job:	on that will assist you in pe	rforming the essential functions of				
Applicant's Signature	Date					
To Be Completed by Employer:						
From the EEO job categories listed below, which one best describes the Deputy's position:						
 Executive/Senior-Level Officials & Managers First/Mid-Level Officials and Managers Professionals Technicians Sales Workers 	Administrative Craft Workers Operatives Laborers and Service Workers	Helpers				
Completed by:	Date:					

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