

**Miami Shores Village
Police Department**

9990 Northeast 2 Avenue Miami Shores, Florida 33138
Phone (305) 759-2468 Email: Natasha.McKay@mspd.org

EMPLOYMENT APPLICATION

OFFICE USE ONLY

APPROVED

DISAPPROVED

REASONS:

PX _____

BY: _____

INSTRUCTIONS: *Please print or type all information.* The application must be filled out accurately and completely. Answer all questions. Do not leave an item blank. If an item does not apply, write N/A (not applicable). Incomplete applications will not be considered. All statements made on the application are subject to verification. Exaggerated, false, or misleading statements may be cause for rejection of the application and/or termination of employment. Eligibility for hire may be based on a rating of this application; therefore, completeness and accuracy is of the utmost importance. *Please include additional pages as needed*

Position Applied For: _____		Social Security Number: _____	
Last Name: _____	First: _____	Middle Initial: _____	
Street Address: _____			
City: _____	State: _____		Zip Code: _____
Home Phone: _____	Work/Message Phone: _____	E-Mail: _____	

Please Check Appropriate Response

1. Have you ever worked for the Miami Shores Village?
If yes, please give date(s) of employment. _____

2. Are you a U.S. citizen? Yes No

If no, are you authorized by Immigration and Naturalization to work in the U.S.? Yes No

Alien #A: _____

Admission #: _____

3. Will you work night shift? (if applicable) Yes No

Will you work weekends? Yes No

Will you work beyond normal hours? Yes No

4. Do you have or have you ever applied for a passport?
 Yes No

Passport No: _____

5. Are you related to a City employee or is any member of your family employed by Miami Shores Village?

Yes No If yes, please give the person's

Name: _____

Relationship: _____

Department: _____

6. Were you in the U. S. Armed Forces? Yes No

Did you receive an honorable discharge? Yes No

Do you claim veteran's preference? Yes No

7. Have you ever been found guilty of, had adjudication withheld, pled no contest, charged or received a notice of summons to appear for any offense?

Yes No

If yes, please give details below:

Date: _____

Agency: _____

Offense/Charge: _____

Felony Misdemeanor

Outcome: _____

Note: A conviction does not automatically mean you cannot be employed by Miami Shores Village. The nature of the offense, how long ago it occurred, etc., are given consideration. Use a separate page for more than one incident.

8. List all other names you have used including circumstances and time periods you used them. (For example: former, maiden, birth name(s), alias(es), or nickname(s).

Name	Circumstances
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9. DRIVER'S LICENSE INFORMATION

Do you have a valid Driver's License? _____ Driver's License Number: _____ State: _____ Expiration Date: _____ CDL Class: _____ Endorsements: _____	Has your license ever been suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No Has your license ever been revoked? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide dates and explain: _____ _____ _____
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9. PLEASE LIST ALL TRAFFIC CITATIONS RECEIVED WITHIN THE LAST SEVEN (7) YEARS (driving under the influence, driving while intoxicated, etc., should be listed under number 7 on page 1).

Date: _____ Agency: _____ Offense/Charge: _____ Points: _____ Outcome: _____ Date: _____ Agency: _____ Offense/Charge: _____ Points: _____ Outcome: _____	Date: _____ Agency: _____ Offense/Charge: _____ Points: _____ Outcome: _____ Date: _____ Agency: _____ Offense/Charge: _____ Points: _____ Outcome: _____
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Suspensions, revocations, or traffic citations do not automatically mean that you cannot be employed by Miami Shores Village. All the circumstances will be considered to determine whether they impact on your ability to succeed as a Miami Shores Village employee.

10. EDUCATION AND SPECIAL TRAINING

Do you have a High School Diploma? Yes No GED Yes No Date GED Obtained: _____

If not, highest grade completed: _____

Name and location of last High School attended: _____

Name	City	State
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List Special Training (Business, Trade, Vocational, Armed Forces Schools, etc.) Below:

Name and Location	Total Hours Completed	Hours required for certification	Course/Subject Taken	Certificates Received

List Colleges and Universities Attended Below:

Name and Location	Credit Hours Received		Did you graduate?		Major/Minor Degree Field of Program of Study	Type of Degree Received
	Sem.	Qtr.	Yes	No		

11. Employment

INSTRUCTIONS: Beginning with your present or most recent job, describe your previous work experience. List all prior employers. List each promotion or transfer as a separate job even if they were with the same employer. Include Military, part time, and self-employment. List all gaps in work history in spaces provided. If you have more than four (4) separate periods of employment, sign and attach sheets in the same format as below. Resumes will not be accepted as official applications.

(Job 1) Present or most Recent Employer						Employer: _____	
From		To		Total Time		Address: _____	
Mo.	Yr.	Mo.	Yr.	Yrs.	Mo.	Telephone Number: _____	
						Your Job Title: _____	
Hours per Week _____				Supervisor's Name and Title: _____			
Starting Salary		\$ _____		per _____		Reason For Leaving Position: _____	
Last Salary		\$ _____		per _____		May we contact your present employer? ◦ Yes ◦ No	
Specific Duties: _____							

Number of Employees supervised (if applicable): _____							

BETWEEN THESE JOBS (if applicable): ◦ UNEMPLOYED ◦ IN SCHOOL FROM (mo/yr): _____ TO (mo/yr): _____

(Job 2) Present or most Recent Employer						Employer: _____	
From		To		Total Time		Address: _____	
Mo.	Yr.	Mo.	Yr.	Yrs.	Mo.	Telephone Number: _____	
						Your Job Title: _____	
Hours per Week _____				Supervisor's Name and Title: _____			
Starting Salary		\$ _____		per _____		Reason For Leaving Position: _____	
Last Salary		\$ _____		per _____			
Specific Duties: _____							

Number of Employees supervised (if applicable): _____							

BETWEEN THESE JOBS (if applicable): ◦ UNEMPLOYED ◦ IN SCHOOL FROM (mo/yr): _____ TO (mo/yr): _____

(Job 3) Present or most Recent Employer						Employer: _____	
From		To		Total Time		Address: _____	
Mo.	Yr.	Mo.	Yr.	Yrs.	Mo.	Telephone Number: _____	
						Your Job Title: _____	
Hours per Week _____				Supervisor's Name and Title: _____			
Starting Salary		\$ _____		per _____		Reason For Leaving Position: _____	
Last Salary		\$ _____		per _____			
Specific Duties: _____							

Number of Employees supervised (if applicable): _____							

BETWEEN THESE JOBS (if applicable): ◦ UNEMPLOYED ◦ IN SCHOOL FROM (mo/yr): _____ TO (mo/yr): _____

(Job 4) Present or most Recent Employer						Employer: _____	
From		To		Total Time		Address: _____	
Mo.	Yr.	Mo.	Yr.	Yrs.	Mo.	Telephone Number: _____	
						Your Job Title: _____	
Hours per Week _____				Supervisor's Name and Title: _____			
Starting Salary		\$ _____		per _____		Reason For Leaving Position: _____	
Last Salary		\$ _____		per _____			
Specific Duties: _____							

Number of Employees supervised (if applicable): _____							

NOTE: We may contact previous employers to verify employment information.

Employment Continued

1) ___yes ___no Have you **ever** been disciplined by any current or past employer(s)? (If yes, list each type of discipline, employer, and dates) _____

2) ___yes ___no Have you **ever** been terminated or asked to resign from a job? (If yes, list each employer, reason and dates) _____

3) ___ yes ___ no Have you **ever** resigned, been given the opportunity to resign from a job, or left a job by mutual agreement, following allegations of misconduct or unsatisfactory job performance or unable to perform training requirements? (If yes, list each employer, reason and dates)

4) Describe any word processing or computer skills and list all software that you are proficient with:

5) Do you currently have any personal profile accounts on websites such as MySpace, Facebook, or any other such type of internet site? _____ yes _____ no If yes, list websites: _____

Please read this statement carefully before signing below:

Miami Shores Village is an Equal Opportunity Employer.

I hereby certify that each response on this application and all other information I have furnished in applying for employment with Miami Shores Village is true and correct. I understand that any incorrect, incomplete, or false statement or information I have furnished may subject me to disqualification in an examination or to discharge at any time.

Copies of Education Documents, Birth Certificate, Photo Identification, and Social Security Card must be submitted prior to employment. All information is subject to investigation and verification.

Miami Shores Village requests social security numbers for the following purposes: track employment application records; pre-employment background checks; verify eligibility for employment; withhold federal and state taxes; comply with state new-hire reporting requirements; enrollment in pension and benefits plans.

Subsequent to an offer of employment, I give my voluntary consent to be medically examined and to provide a sample of urine which may be tested for use of drugs and/or controlled substances.

My signature affirms that all information is true to the best of my knowledge and that I understand that any misstatement of fact may result in disqualification or dismissal.

SIGN YOUR NAME HERE	DATE
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MUST BE SIGNED AND WITNESSED

Witnessed by:

Signature: _____

Print Name: _____

Miami Shores Village

MSV USE ONLY

DOCUMENTS CHECKLIST

Name: _____

- _____ Birth Certificate (Must bear Official Seal)
- _____ Birth / Death Certificate of Spouse if ever married
- _____ Certificate of Naturalization (Original only)
- _____ High School Diploma / GED Certificate and Scores (Original only)
- _____ College Diploma/s (Original only)
- _____ DD214 (Complete original only)
- _____ Current Driver's License
- _____ Certified Driving History from *all states* where a DL has been issued
- _____ Social Security Card
- _____ Social Security Earnings Report
- _____ Documentation of all legal change of name
- _____ Other personal papers (Resume, Curriculum Vitae, Divorce, Commendations, Training Certificates)
- _____ Passport Type Photographs (2; no older than 6 months)
- _____ Professional / Occupational Licenses
- _____ Firearms / Weapons Licenses

REMINDER: Copies are acceptable; however, the original document must be presented for review. *These documents are required at the time of your initial screening interview.* As such, processing may stop until all of these documents are submitted.

**NOTICE TO APPLICANT OF INTENT
TO OBTAIN A CONSUMER REPORT**

Dear Applicant,

In connection with your application for employment, we would like to procure certain background information concerning you which is contained in a consumer report. A consumer report may contain information regarding your driving record and/or criminal background.

Before we procure a consumer report, you must authorize such procurement in writing. You have the right to decline authorization for us to procure a consumer report. However, we will not consider you further for employment if you so decline. On the bottom of this form, you will find a release which will allow us to obtain a consumer report. Please read the release carefully before signing it and indicating your choice regarding disclosure.

RELEASE TO PROCURE A CONSUMER REPORT

I have read the "Notice to Applicant of Intent to Obtain Consumer Report."

I understand that I have the right to decline authorization for Miami Shores Village to procure a consumer report concerning me.

Understanding these rights,

_____ I authorize the Miami Shores Village to procure a consumer report concerning me.

_____ I do not authorize the Miami Shores Village to procure a consumer report concerning me.

NAME (Print Please)

SOCIAL SECURITY NUMBER

SIGNATURE

DATE

VETERANS' PREFERENCE: Check the appropriate block if you are claiming veteran's preference. **Documentation substantiating your claim must be furnished at the time of application.**

1. A veteran with a service – connected disability who is eligible for or receiving compensation, disability retirement or pension under public laws administered by the U.S. Department of Veterans Affairs and the Department of Defense.
2. The spouse of a veteran who cannot qualify for employment because of a total and permanent service connected disability, or the spouse of a veteran missing in action, captured, or forcibly detained by a foreign power.
3. A veteran of any war who has served on active duty for one day or more during a wartime period, excluding active duty for training, and who was discharged under honorable conditions from the Armed Forces of the United States of America.
4. The un-married widow or widower of a veteran who died of a service – connected disability.
5. The Armed Forces Expeditionary Medal, as well as the Global War on Terrorism Expeditionary Medal are qualifying for Veteran's Preference, provided the individual is otherwise eligible.
6. Have you ever claimed and been employed using veteran's preference?
_ Yes _ No If "yes", please give the name of employer: _____

NOTE: Under Florida law FS 295, preference in appointment shall be given first to those persons included in #1 and #2 above, and second to those persons included in #3 and #4 above. If an applicant claiming veteran's preference for a vacant position is not selected for the vacant position, he/she may file a complaint with the Florida Department of Veteran's Affairs, Mary Grizzle Office Bldg, 11351 Ulmerton Road, Room 311-K, Largo, FL 33778 or www.FloridaVets.org.