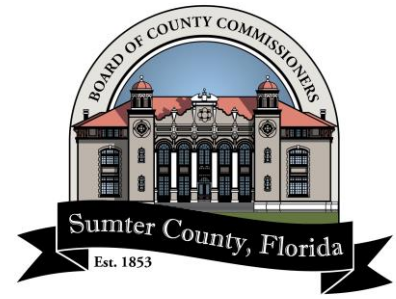


# Board of County Commissioners

## Sumter County, Florida

7375 Powell Road • Wildwood, FL34785 • Phone (352) 689-4400 • FAX: (352) 689-4401  
Website: <http://www.sumtercountyfl.gov>



### EMPLOYMENT/SCHOLARSHIP APPLICATION – FIRE AND EMS

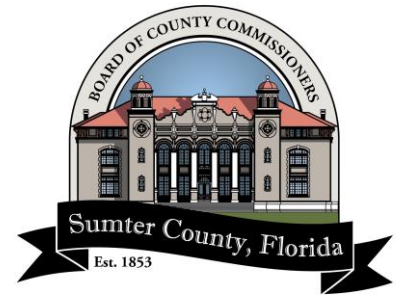
PLEASE READ THE INFORMATION BELOW BEFORE COMPLETING THIS APPLICATION.

1. General Information
  - a. If you require special accommodation because of a disability to participate in the application/selection process, you must notify the hiring authority in advance.
  - b. We are an Equal Opportunity Employer (EEO). We do not discriminate on the basis of race, ethnicity, religion, color, sex, age, national origin, marital status, veteran's status, disability, or any other legally protected status.
  - c. All information provided is subject to verification. Any misrepresentation, false or incomplete information or omission of facts is cause for rejection of the application or termination from the program or County employment.
  - d. Incomplete applications **may not** be considered for processing.
2. All applications must include the following information:
  - a. Complete contact information.
  - b. Complete dates of employment for each position listed for previous employment.
  - c. Complete essay requirement.
  - d. Signature of applicant.
3. Copies of the following documents must be provided with application:
  - a. Accredited High School Diploma or GED and any post secondary degree, if applicable
  - b. Valid Florida Driver's License and a driving record acceptable to insurance provider
  - c. Firefighter Certificate (if applicable)
  - d. EMT Certificate (if applicable)
  - e. BLS or ACLS Certificate (if applicable)

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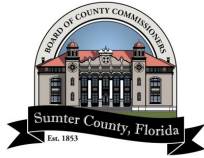
*Please retain this document for your records.*

### **“Sumter County Social Security Number Collection Resolution”**

On February 12, 2008, the Board of County Commissioners adopted a resolution which directed that this written statement be provided to any individual when his/her Social Security Number is collected by the County.

*“The Sumter County Commission, through its subdivisions, collects your Social Security Number for the following purposes: identification and verification; credit worthiness; billing and payment; data collection, reconcilliation, tracking, background checks, victim reports, benefit processing, program eligibility analysis and tax reporting. Social Security Numbers are also used as a unique numeric identifier and may be used for such purposes.”*

If you have any questions regarding this matter, please contact the Employee Services Department.



# SCHOLARSHIP APPLICATION

\_\_\_\_\_  
Type or title of the position sought

\_\_\_\_\_  
Date of Application

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Initial

\_\_\_\_\_  
Current Residence – Street No. and Name

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip code

\_\_\_\_\_  
Mailing Address – If different from above

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip code

\_\_\_\_\_  
Home Telephone

\_\_\_\_\_  
Business Telephone

\_\_\_\_\_  
Alternate Telephone

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Driver's License Number

A  B  C  D  E (regular)  
Driver's License Class (Check One)

Yes  No

Has your Driver's License ever been  
suspended or revoked?

\_\_\_\_\_  
If yes, please explain

\_\_\_\_\_  
Have you ever been convicted, pled no contest, had adjudication withheld or had prosecution deferred on any DUI or alcohol related offense? Do you have any charges pending against you or are you currently enrolled in a pre-trial intervention program related to any DUI or alcohol related offense?  
If yes, please explain fully. \_\_\_\_\_

Yes  No

\_\_\_\_\_  
Have you ever been convicted of a felony or first-degree misdemeanor?  
If yes, please explain below.

Yes  No

\_\_\_\_\_  
Have you ever pled nolo contendere or pled guilty to a crime that is a felony or a first-degree misdemeanor?  
If yes, please explain below.

Yes  No

\_\_\_\_\_  
Have you ever had Adjudication of guilt withheld to a crime that is a felony or a first-degree misdemeanor?  
If yes, please explain below.

Yes  No

\_\_\_\_\_  
Have you ever been a defendant in a civil action for intentional tort such as battery or assault?  
If yes, please explain the nature of the intentional tort and the disposition of the action below.

Yes  No

\_\_\_\_\_  
**A "Yes" answer to the above questions will not automatically bar you from employment/scholarship. The nature, severity, and date of the offense in relation to the position for which you are applying are considered. If you do not understand any of the above questions, you must ask a representative of Employee Services for clarification.**

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**Education and Training - Proof of Education Required**

Did you graduate from high school?  Yes  No

If yes, give name and location. \_\_\_\_\_  
Name City/State Month/Year

If no, do you possess a GED?  Yes  No If yes, give month/year \_\_\_\_\_

Check highest grade completed:  8  9  10  11  12  13  14  15  16  17  18  19  20  
High School College/Trade School Graduate

Name and Location of College or School	Dates attended	Degree awarded	Major
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Active Professional Licenses/Certificates	Date received	Date expires
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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Are you legally allowed to work in the United States?  Yes  No

Do you have adequate transportation to and from work?  Yes  No

Are you related to an Employee or Elected Official of the County?  Yes  No

If Yes, please give the name(s) and relationship of the employee(s)/official(s).  
\_\_\_\_\_  
\_\_\_\_\_

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## Employment Record

### List all Jobs held in the last TEN years.

Start with your present or most recent position and work back. Be specific. Please make every effort to complete the information requested. Please account for ALL periods of time, including any periods of unemployment. If self-employed, give the company name and list business references. If additional space is needed, please use additional pages.

#### 1. Present or most recent job

From      To      Hours per week \_\_\_\_\_ Ending Salary \$ \_\_\_\_\_  Hourly     Weekly     Annually  
\_\_\_\_/\_\_\_\_    \_\_\_\_/\_\_\_\_      Employer \_\_\_\_\_  
Month/Yr    Month/Yr  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone # \_\_\_\_\_ Job Title \_\_\_\_\_ Supervisor's Name \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_  
May we contact your employer?  Yes     No    Specific duties and job tasks performed \_\_\_\_\_

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#### 2. Previous Employer

From      To      Hours per week \_\_\_\_\_ Ending Salary \$ \_\_\_\_\_  Hourly     Weekly     Annually  
\_\_\_\_/\_\_\_\_    \_\_\_\_/\_\_\_\_      Employer \_\_\_\_\_  
Month/Yr    Month/Yr  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone # \_\_\_\_\_ Job Title \_\_\_\_\_ Supervisor's Name \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_  
May we contact your employer?  Yes     No    Specific duties and job tasks performed \_\_\_\_\_

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#### 3. Previous Employer

From      To      Hours per week \_\_\_\_\_ Ending Salary \$ \_\_\_\_\_  Hourly     Weekly     Annually  
\_\_\_\_/\_\_\_\_    \_\_\_\_/\_\_\_\_      Employer \_\_\_\_\_  
Month/Yr    Month/Yr  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone # \_\_\_\_\_ Job Title \_\_\_\_\_ Supervisor's Name \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_  
May we contact your employer?  Yes     No    Specific duties and job tasks performed \_\_\_\_\_

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Have you ever been terminated or asked to resign from employment?  Yes  No

If yes, please explain the circumstances below.

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Do you wish to claim Veteran's preference  Yes  No

If yes, additional documentation will be required, including a DD214 or other official document from the Division of Veteran's Affairs which substantiates your eligibility for Veteran's preference.

**Certification:**

I understand that applications submitted for county employment/scholarship 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.

I understand that any false, incomplete, or misleading information is grounds for rejection of this application or, if discovered at any time after I am employed, may result in dismissal. By submitting this application or other documents, I agree to conform to the County's policies and I understand that, if hired, my employment and compensation will be for no definite duration and may be terminated, with or without cause, and with or without notice, at any time, at the option of either the County or me.

I authorize an investigation of my statements and information contained in this application for employment/scholarship as may be necessary in arriving at any employment/scholarship decision. To the extent possible under the law, I waive any legal requirement to provide notice to me regarding reports or records given or received in accordance with this authorization. Accordingly, all third parties are authorized to disclose any and all information to the County as a prospective employer, and I agree to release all third parties, as well as the County, for any claims arising out of actions taken under these authorizations.

If accepted for employment, I understand that the use of illegal drugs is prohibited, and I agree to submit to drug testing to detect the use of illegal drugs at any time during employment. I understand that any offer of employment is conditional upon satisfactory results of any required drug test or background investigation.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

SUMTER COUNTY BOCC SCHOLARSHIP ESSAY - FIRE

In the space below, please express the reasons you want to become a firefighter for Sumter County. Response must be limited to this single page.



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### **NOTICE TO APPLICANT OF INTENT TO OBTAIN BACKGROUND INFORMATION**

By this document, the County discloses to you that a consumer report, including an investigative consumer report containing information as to your character, general reputation, personal characteristics and mode of living, may be obtained for employment purposes as part of the pre-employment background investigation and, if hired, at any time during your employment. Should an investigative consumer report be requested, you will have the right to demand a complete and accurate disclosure of the nature and scope of the investigation requested and a written summary of your rights under the Fair Credit Reporting Act. Please sign below to signify receipt of the foregoing disclosure and to authorize Human Resources to obtain such consumer reports as part of the pre-employment background investigation. If hired, this authorization shall remain on file and shall serve as an ongoing authorization for Human Resources to obtain these reports at any time during your employment with the BOCC.

Before we may obtain this information your written authorization is required. You have the right to decline authorization for us to obtain this information. However, we will not consider you for employment if you decline. Please read the release carefully before signing.

### **WRITTEN AUTHORIZATION TO OBTAIN BACKGROUND INFORMATION**

I have read the Notice to Applicant of Intent to obtain Background Information. I understand that I have the right to decline authorization for the Board of Sumter County Commissioners to obtain this information concerning me. I understand this may concern information regarding any public record of any convictions for felonies or first-degree misdemeanors, civil judgments, my driving record and insurability, and/or my character, personal characteristics and general reputation.

- Understanding these rights,  I **authorize** release of this information.  
 I **do not authorize** release of this information.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Name: \_\_\_\_\_  
First Middle Last (Maiden)

Address: \_\_\_\_\_  
City State Zip

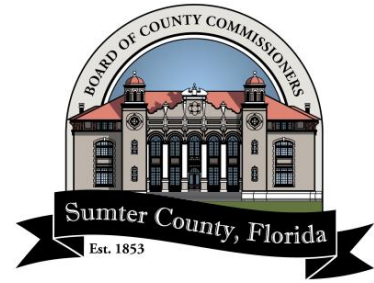
**Driver's License Number** \_\_\_\_\_

**Social Security Number** \_\_\_\_\_

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### EEO SURVEY

Although the following information is not mandatory, it is requested to aid the Board of Sumter County Commissioners in its commitment to Equal Employment Opportunities. It is unlawful for an employer to fail or refuse to hire any individuals or deprive any individual of employment opportunities because of race, color, religion, national origin, age, marital status or disability.

A SEX  MALE  FEMALE

B DATE OF BIRTH \_\_\_\_\_

C RACE (Check One Only)

WHITE  BLACK  HISPANIC  ASIAN/PACIFIC ISLANDER  AMERICAN INDIAN/ALASKAN NATIVE

OTHER (Specify) \_\_\_\_\_

How did you learn of this job opening?

Newspaper

Job Board

Job Line

Website

Other