

**LEE COUNTY GOVERNMENT EMPLOYMENT APPLICATION**

**LEE COUNTY GOVERNMENT**  
 P.O. Box 398  
 ATT: Human Resources  
 Fort Myers, Florida 33902  
 (239) 533-2245  
<http://www.lee-county.com>



**Job #** \_\_\_\_\_

**Job Title** \_\_\_\_\_

**PERSONAL INFORMATION**

**NAME:** (Last, First, Middle)

**EMAIL ADDRESS:**

**ADDRESS:** (Street, City, State, Zip Code)

**HOME PHONE:**

**ALTERNATE PHONE:**

**DRIVER'S LICENSE:**

Yes No

**DL STATE:**

**LEGAL RIGHT TO WORK IN THE UNITED STATES?**

Yes No

**PREFERENCES**

**PREFERRED SALARY:**

**ARE YOU WILLING TO RELOCATE?**

Yes No Maybe

**WHAT TYPE OF JOB ARE YOU LOOKING FOR?**

Regular Temporary Seasonal Internship

**TYPES OF WORK YOU WILL ACCEPT:**

Full Time Part Time Per Diem

**SHIFTS YOU WILL ACCEPT:**

Day Evening Night Rotating Weekends On Call (as needed)

**EDUCATION**

**DATES:**

From: \_\_\_\_\_ To: \_\_\_\_\_

**SCHOOL NAME:**

**MAJOR:**

**LOCATION:** (City, State)

**HIGHEST GRADE COMPLETED:**

**DID YOU GRADUATE?**

Yes No

**DEGREE RECEIVED:**

**DATES:**

From: \_\_\_\_\_ To: \_\_\_\_\_

**SCHOOL NAME:**

**MAJOR:**

**LOCATION:** (City, State)

**HIGHEST GRADE COMPLETED:**

**DID YOU GRADUATE?**

Yes No

**DEGREE RECEIVED:**

**DATES:**

From: \_\_\_\_\_ To: \_\_\_\_\_

**SCHOOL NAME:**

**MAJOR:**

**LOCATION:** (City, State)

**HIGHEST GRADE COMPLETED:**

**DID YOU GRADUATE?**

Yes No

**DEGREE RECEIVED:**

**WORK EXPERIENCE**

<b>DATES:</b> From:            To:		<b>EMPLOYER:</b>	<b>POSITION TITLE:</b>
<b>ADDRESS:</b> (Street, City, State, Zip Code)			
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>HOURS PER WEEK:</b>	<b>SALARY:</b>	<b>REASON FOR LEAVING:</b>	
<b>DUTIES:</b>			

<b>DATES:</b> From:            To:		<b>EMPLOYER:</b>	<b>POSITION TITLE:</b>
<b>ADDRESS:</b> (Street, City, State, Zip Code)			
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>HOURS PER WEEK:</b>	<b>SALARY:</b>	<b>REASON FOR LEAVING:</b>	
<b>DUTIES:</b>			

<b>DATES:</b> From:            To:		<b>EMPLOYER:</b>	<b>POSITION TITLE:</b>
<b>ADDRESS:</b> (Street, City, State, Zip Code)			
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>HOURS PER WEEK:</b>	<b>SALARY:</b>	<b>REASON FOR LEAVING:</b>	
<b>DUTIES:</b>			

<b>DATES:</b> From:            To:		<b>EMPLOYER:</b>	<b>POSITION TITLE:</b>
<b>ADDRESS:</b> (Street, City, State, Zip Code)			
<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>HOURS PER WEEK:</b>	<b>SALARY:</b>	<b>REASON FOR LEAVING:</b>	
<b>DUTIES:</b>			

**CERTIFICATES AND LICENSES**

<b>TYPE:</b>	<b>ISSUING AGENCY:</b>
<b>TYPE:</b>	<b>ISSUING AGENCY:</b>
<b>TYPE:</b>	<b>ISSUING AGENCY:</b>

**SKILLS**

<b>OFFICE SKILLS:</b>					
Typing:					
Data Entry:					
<b>OTHER SKILLS:</b>					
Skill:	<input type="checkbox"/> Beginner	<input type="checkbox"/> Skilled	<input type="checkbox"/> Expert	Years:	Months:
Skill:	<input type="checkbox"/> Beginner	<input type="checkbox"/> Skilled	<input type="checkbox"/> Expert	Years:	Months:
Skill:	<input type="checkbox"/> Beginner	<input type="checkbox"/> Skilled	<input type="checkbox"/> Expert	Years:	Months:
Skill:	<input type="checkbox"/> Beginner	<input type="checkbox"/> Skilled	<input type="checkbox"/> Expert	Years:	Months:
Skill:	<input type="checkbox"/> Beginner	<input type="checkbox"/> Skilled	<input type="checkbox"/> Expert	Years:	Months:
<b>LANGUAGE(S):</b>					
Language:	<input type="checkbox"/> Speak	<input type="checkbox"/> Read	<input type="checkbox"/> Write		
Language:	<input type="checkbox"/> Speak	<input type="checkbox"/> Read	<input type="checkbox"/> Write		
Language:	<input type="checkbox"/> Speak	<input type="checkbox"/> Read	<input type="checkbox"/> Write		

**ADDITIONAL INFORMATION**

(Military Service, Professional Memberships, Volunteer Experience, etc.)
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**REFERENCES**

<b>REFERENCE TYPE:</b>	<b>NAME:</b>	<b>POSITION:</b>
<b>ADDRESS:</b> (Street, City, State, Zip Code)		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b>
<b>REFERENCE TYPE:</b>	<b>NAME:</b>	<b>POSITION:</b>
<b>ADDRESS:</b> (Street, City, State, Zip Code)		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b>
<b>REFERENCE TYPE:</b>	<b>NAME:</b>	<b>POSITION:</b>
<b>ADDRESS:</b> (Street, City, State, Zip Code)		
<b>EMAIL ADDRESS:</b>		<b>PHONE NUMBER:</b>

**AGENCY WIDE SUPPLEMENTAL QUESTIONS**

**1. Are you legally eligible for employment in the United States?**

- Yes       No

**2. Have you ever been convicted of any offense(s) other than minor traffic violations?**

**NOTE: Reckless driving and DUI are considered criminal traffic violations.**

- Yes       No

**3. If you answered "Yes" to question #2 above, please indicate the location, date, and description of the offense(s):**

**4. Have you ever had your driver's license suspended/revoked?**

**NOTE: Reckless driving and DUI are considered criminal traffic violations.**

- Yes       No

**5. If you answered "Yes" to question #4 above, please describe, including date(s):**

**6. Have you ever worked in any position for the Lee County Board of County Commissioners?**

- Yes       No

**7. If you answered "Yes" to question #6 above, please list position, department, start date, and end date:**

**8. Were you a participant in the Lee County Board of County Commissioners 2008 Voluntary Separation Incentive Program (employee buy-out)?**

- Yes       No

**9. Do you have any relatives currently working for Lee County Board of County Commissioners?**

- Yes       No

**10. If you answered "Yes" to question #9 above, please list name(s) and department(s):**

11. Have you ever been known or employed under any other names?

- Yes       No

12. If you answered "Yes" to question #11 above, please list previous name(s):

13. Do you wish to claim Veterans' Preference? If yes, you MUST include a copy of your DD214.

If you claim Veterans' Preference, you must submit required documentation at the time you apply for employment (late submissions will not be accepted). Please fax your DD214 to (239) 485-2077, drop it off at our office at 2115 Second St. Fort Myers, FL 33901 or mail to P.O. Box 398 Fort Myers, FL 33902. For Veterans' Preference questions, please call (239) 533-2245.

If any preference eligible applicant claiming Veterans' Preference for a vacant position is not selected for the position, they have the right to an investigation by the Division of Veterans' Affairs if a non-preference eligible applicant is appointed to a position. In order to commence the investigation, the applicant must file a written complaint addressed to Division of Veterans' Affairs, P. O. Box 1437, St. Petersburg, FL 33731. A complaint shall be filed within 21 days after notice of the hiring decision. If a notice of a hiring decision is not given, it is the responsibility of the veteran to contact the employer within two months of the application to determine if the position has been filled. For further information, contact the Department of Veterans' Affairs.

- Yes       No

14. Please list all residences for the past 10 years. Complete addresses and dates are required.

\_\_\_\_\_, \_\_\_\_\_  
\_\_\_\_\_, \_\_\_\_\_  
\_\_\_\_\_, \_\_\_\_\_  
\_\_\_\_\_, \_\_\_\_\_  
\_\_\_\_\_, \_\_\_\_\_

15. How did you learn about this position?

- Lee County Website       GOVT TV Channel       Walk-in       Job Line  
 Paper Listing       Newspaper       Governmentjobs.com       Word of Mouth  
 Other

**Please Read Carefully Before Signing**  
**APPLICANT'S CERTIFICATION AND AGREEMENT**

I UNDERSTAND AND AGREE that, except as specifically prohibited by state law or County ordinance or regulation, all County policies and procedures do not create any property rights in employment; and that employment may be terminated by either the employee or the County with or without cause.

I CERTIFY that all information given out in this employment application, in related documents and in all interviews is true and correct. I understand that the County may make a thorough investigation of my character, reputation, past employment and other relevant history. I authorize the giving and receiving of any such information requested by the County (including financial and credit records) and hereby relieve and release all former employers and their agents of any liability for any information they may give to the County. I also authorize educational institutions to furnish any records of my education, coursework, and/or degrees granted while attending that institution. I hereby waive any rights or claims I may have whether present fully developed or not against Lee County or its agents or employees arising out of or resulting from the release, authorized or unauthorized, of the following information received pursuant to or in connection with the County's handling, processing, investigation, etc., of my application for employment with the County.

I UNDERSTAND that if hired, I will be placed on a 6-month probationary period. I further understand that if in accordance with the Florida Statute §443.131(3)(a)(2), I am terminated for unsatisfactory work performance within 3 months, the employer's unemployment account shall not be charged for any unemployment benefits paid to me.

I AGREE that if Lee County employs me, a future potential employer may contact the County or its representatives concerning my work record and my work performance at the County. I hereby consent to and authorize persons employed by the County to divulge any and all information they consider relevant to any person representing himself or herself to be an employer or potential employer of mine with respect to my work record and/or performance of my job at Lee County. I understand that all information provided herein is public record and is subject to review upon request.

I AGREE to submit to any appropriate testing, including to determine the presence of alcohol or illegal controlled substances in my body, under whatever policies or procedures Lee County has in effect at the time testing is required.

I AGREE to pre-employment testing if requested and understand that failure to meet any job-related medical and/or health requirements for the positions may prevent employment by the County.

I UNDERSTAND that all employees who do not have a written employment contract with a limited and specified duration are employed at the will of the County and that all offers of employment are contingent upon successful completion of all background investigations; which may include, but are not limited to, employer and non-employer references and, where applicable, pre-employment testing.

I UNDERSTAND that Lee County will not tolerate sexual and any other form of unlawful harassment. I understand that I have the affirmative obligation to report incidents and participate in any investigation as requested. I also understand that unlawful harassment is grounds for disciplinary action up to and including immediate dismissal.

I UNDERSTAND that falsification of any information so given or other information that, either singly or cumulatively, would tend to negatively impact the hiring decision discovered as a result of any background check or investigation may be grounds for not hiring an applicant or may subject me to immediate dismissal if employed.

I AGREE that if hired by Lee County, upon termination of employment, I shall return all County property.

*APPLICATION DISCLOSURE*

I UNDERSTAND that pursuant to the requirements of the Fair Credit Reporting Act, a *consumer report* may be made in connection with my application for employment. If I am denied employment, either wholly or partly, because of information contained in a consumer report, a disclosure will be made to me of the name and address of the consumer-reporting agency making such a report. I will also receive a copy of the report and a statement of my consumer rights. I have read the above notice and understand what it means. I hereby authorize the procurement of a consumer report for employment purposes at the time of my application or if hired at anytime during my employment with Lee County.

Applicant Name (PLEASE PRINT CLEARLY): \_\_\_\_\_

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

**QUESTIONS 16 THROUGH 18 ARE OPTIONAL**

**16. Gender:**

- Female     Male

**17. Race/Ethnicity**

- White (not of Hispanic origin)  
 Hispanic  
 Black (not of Hispanic origin)  
 Asian or Pacific Islander  
 American Indian or Alaskan Native

**18. Handicapped/Disabled:**

- Yes     No