



Application for Employment

PLEASE PRINT

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodations to the application and/or interview process should notify a representative of the Human Resources Department.

Position(s) applied for: \_\_\_\_\_ Date of application: \_\_\_\_\_

Referral Source: \_\_\_Advertisement \_\_\_Employee \_\_\_Relative
\_\_\_Employment Agency \_\_\_Other\_\_\_\_\_

Name of source (if applicable)\_\_\_\_\_

Name: \_\_\_\_\_
LAST FIRST MIDDLE

Address: \_\_\_\_\_
STREET CITY STATE ZIP

SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Phone: \_\_\_\_\_ Cell/other: \_\_\_\_\_

If necessary, best time to call you at home is: \_\_\_\_\_ a.m./p.m.

May we contact you at work? \_\_\_yes \_\_\_no

If yes, work number and best time to call: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_
\_\_\_\_\_ a.m./p.m.

If you are under 18 and it is required, can you furnish a work permit? \_\_\_yes \_\_\_no

If no, please explain:
\_\_\_\_\_

Have you submitted an application here before? \_\_\_yes \_\_\_no

If yes, give dates and position(s): \_\_\_\_/\_\_\_\_/\_\_\_\_ \_\_\_\_\_

Have you ever been employed by FCP at any location? \_\_\_yes \_\_\_no

If, yes, please indicate location: [ ] Arlintgon [ ] Northside [ ] Ponte Vedra [ ] 1st Care
Univeristy [ ] 1st Care Mandarin [ ] Flemming Island [ ] Neptune Bch [ ] Argyle [ ] Orange
Park

If yes, give dates: (from) \_\_\_\_/\_\_\_\_/\_\_\_\_ (to) \_\_\_\_/\_\_\_\_/\_\_\_\_

Are you legally eligible for employment in this country? \_\_\_yes \_\_\_no

AN EQUAL OPPORTUNITY EMPLOYER

Date available for work: \_\_\_\_/\_\_\_\_/\_\_\_\_ Desired salary range \$\_\_\_\_\_

Type of employment desired: \_\_\_Full-time \_\_\_Part-time \_\_\_Temporary \_\_\_Seasonal  
\_\_\_Educational Co-op

Will you relocate if the job requires it? \_\_\_yes \_\_\_no Will you travel if required? \_\_\_yes \_\_\_no

Are you able to meet the attendance requirements of this position? \_\_\_yes \_\_\_no

Will you work overtime if required? \_\_\_yes \_\_\_no

If no, please explain: \_\_\_\_\_

Have you ever been bonded? \_\_\_yes \_\_\_no

Have you ever pled "guilty" or "no contest" to, or been convicted of a crime?  
\_\_\_yes \_\_\_no

If yes, please provide date(s) and details: \_\_\_\_\_

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\*CRIMINAL BACKGROUND CHECKS WILL BE PERFORMED ON ALL APPLICANTS. ANSWERING, "YES" TO THESE QUESTIONS DOES NOT CONSTITUTE AN AUTOMATIC BAR TO EMPLOYMENT. FACTORS SUCH AS DATE OF THE OFFENSE, SERIOUSNESS AND NATURE OF THE VIOLATION, REHABILITATION AND POSITION APPLIED FOR WILL BE TAKEN INTO ACCOUNT.

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## **Educational Background**

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<b>Name of School</b>	<b># of years completed</b>	<b>Degree/Diploma</b>	<b>GPA/Class Rank</b>	<b>Major</b>	<b>Minor</b>

## **References**

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List name and telephone number of three business/work references who are NOT related to you and are NOT previous supervisors. If not applicable, list three personal references who are NOT related to you.

NAME TELEPHONE # # OF YEARS KNOWN

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## **Additional Information**

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List professional, trade, business or civic associations and any offices held. (Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve.)

<b>ORGANIZATION</b>	<b>OFFICES HELD</b>

List special accomplishments, publications, awards, etc.

(Exclude any memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, verteran/reserve national guard or any other similar status.)

\_\_\_\_\_

\_\_\_\_\_

List any additional information you would like us to consider: \_\_\_\_\_

\_\_\_\_\_

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## Employment History

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Provide the following information of your past and current employers, assignments or volunteer activities, starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in section below.

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Dates: From \_\_\_\_\_ - \_\_\_\_\_ To \_\_\_\_\_ \$ \_\_\_\_\_ Starting rate/salary \$ \_\_\_\_\_ Final rate/salary

Employer \_\_\_\_\_ Address \_\_\_\_\_ Telephone Number \_\_\_\_\_

Starting Job Title \_\_\_\_\_ Final Job Title \_\_\_\_\_ Immediate Supervisor \_\_\_\_\_

Summarize type of work and responsibilities \_\_\_\_\_

Reason for leaving \_\_\_\_\_ May we contact for reference? \_\_\_yes \_\_\_no

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Dates: From \_\_\_\_\_ - \_\_\_\_\_ To \_\_\_\_\_ \$ \_\_\_\_\_ Starting rate/salary \$ \_\_\_\_\_ Final rate/salary

Employer \_\_\_\_\_ Address \_\_\_\_\_ Telephone Number \_\_\_\_\_

Starting Job Title \_\_\_\_\_ Final Job Title \_\_\_\_\_ Immediate Supervisor \_\_\_\_\_

Summarize type of work and responsibilities \_\_\_\_\_

Reason for leaving \_\_\_\_\_ May we contact for reference? \_\_\_yes \_\_\_no

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Employer \_\_\_\_\_ Address \_\_\_\_\_ Telephone Number \_\_\_\_\_

Starting Job Title \_\_\_\_\_ Final Job Title \_\_\_\_\_ Immediate Supervisor \_\_\_\_\_

Summarize type of work and responsibilities \_\_\_\_\_

Reason for leaving \_\_\_\_\_ May we contact for reference? \_\_\_yes \_\_\_no

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Comments (please explain any gaps in employment) \_\_\_\_\_

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## Skills and Qualifications

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Summarize any special training, skills, licenses and/or certifications that may qualify you as being able to perform job-related functions in the position for which you are applying.

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**Applicant Statement**

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I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 form in this regard.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT**

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_