

Application for Employment

We are an Equal Opportunity Employer and committed to excellence through diversity. Please print or type and send.

The application must be fully completed to be considered.

Please complete each section, even if you attach a resume.

Personal Information

Full Name _____
Address _____ City _____ State _____
Zip _____

Phone number _____ Email Address _____

Birthdate _____ Sex: male _____ female _____

Driver License # _____ Social Security # _____

Are you legally eligible to work in the US? Yes _____ No _____

In the last 7 years have you had any car accidents? Yes _____ No _____

In the last 7 years have you had any Motor Vehicle Report? Yes _____ No _____

Do you have the drug test done? Yes _____ No _____

How often do you use drugs? never _____ rarely _____ occasionally _____ usually _____ 1
time per week _____ 1 time per day _____ always _____

how often do you drink alcohol? never _____ rarely _____ occasionally _____ usually _____ 1
time per week _____ 1 time per day _____ always _____

If selected, would you take the Drug Test? Yes _____ No _____

If selected, would you take the Alcohol Test? Yes _____ No _____

Are you willing to undergo a Background check, in accordance with local law and regulations? Yes _____
No _____

Are you willing to undergo DOT physical? Yes _____ No _____

Are you willing to undergo the verification against the national public sex offender? Yes _____
No _____

Are you willing to be checked in the system and not listed in the SAM Award Management System
(www.sam.gov)? Yes _____ No _____

Are you willing to be have been verified against Office of Inspector General website OIG ? Yes _____
No _____

Are you willing to be verified and not listed on the List of Penalties (Terrorists) of the Office of Foreign
Assets Control (OFAC)? Yes _____ No _____

Did you take the NSC FIRST AID, CPR, AED ONLINE Course? Yes _____ No _____

Did you pass the NSC FIRST AID, CPR, AED ONLINE Course with more than 80%? Yes _____ No _____

Did you take the DEFENSIVE DRIVING Course? Yes _____ No _____

Did you pass the DEFENSIVE DRIVING Courses with 80% min? Yes _____ No _____

Did you take the PASSENGER SERVICE AND SAFETY PASS BASIC Course? Yes _____ No _____

Did you pass the PASSENGER SERVICE AND SAFETY PASS BASIC Courses with 80% min? Yes _____ No _____

If selected, would you take the required courses? Yes _____ No _____

Can you overtime if necessary? Yes _____ No _____

Understand and operate GPS devices, two-way radios and cell phones? Yes _____ No _____

Are you able to work in Riverview, FL? Yes _____ No _____

Do you speak Spanish? Yes _____ No _____

Desired pay _____

Employment desired: Full time _____ Part time _____ temporary _____

Education

School Name	Location	Years Attended	Degree received
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

References (Business and Professional only)

Full name	Title	Company	Phone
-----------	-------	---------	-------

Employment History

Employer (1) _____ Work phone _____

Address _____ City _____ State _____ Zip _____

Job Title _____ Dates of employment and unemployment _____

Starting pay rate _____ Ending pay rate _____ Reason why you left _____

Employer (2) _____ Work phone _____

Address _____ City _____ State _____ Zip _____

Job Title _____ Dates of employment and unemployment _____

Starting pay rate _____ Ending pay rate _____ Reason why you left _____

Employer (3) _____ Work phone _____

Address _____ City _____ State _____ Zip _____

Job Title _____ Dates of employment and unemployment _____

Starting pay rate _____ Ending pay rate _____ Reason why you left _____

Signature Disclaimer

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in the non-obtaining or termination of my employment.

Full Name _____ Date _____

Signature