



# Application for Employment

## Please print

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

Referral Source:  Advertisement  Employee  Relative  Florida Oceanographic Website  
 Online  Private Employment Agency  Other \_\_\_\_\_

Name of Source (if applicable): \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State Zip Code

Telephone Numbers \_\_\_\_\_ Email \_\_\_\_\_

If necessary, best time to call you at home is? .....  am  pm

May we contact you at work? .....  Yes  No

If yes, work number and best time to call \_\_\_\_\_  am  pm

If you are under 18, can you furnish a work permit? .....  Yes  No

Have you filed an application before? .....  Yes  No

If yes, give date .....

Have you ever been employed here before? .....  Yes  No

If yes, give dates ..... From \_\_\_\_\_ To \_\_\_\_\_

Are you legally eligible for employment in this country? .....  Yes  No  
(Proof of U.S. Citizenship or immigration status will be required upon employment)

Date available for work .....

Type of employment desired .....  Full-Time  Part-Time  Temporary

Are you on lay-off and subject to recall? .....  Yes  No

Will you travel if job requires it? .....  Yes  No

Will you work overtime if required? .....  Yes  No

Have you been convicted of a felony in the last seven (7) years? .....  Yes  No  
(Such conviction may be relevant if job related, but does not bar you from employment)

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

Do you possess a valid Drivers License .....  Yes  No

# Employment History

List your last four (4) employers, assignments or volunteer activities, starting with the most recent, including military experience. Explain any gaps in employment in the comments section below.

Employer:	Telephone:
Dates Employed:    Start Date:	Current/End Date:
Address:	
Job Title:	
Immediate Supervisor and their Title:	
Starting Hourly Rate/Salary: \$	Final Hourly Rate/Salary: \$
Reason for Leaving:	
May We Contact as a Reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	
Summarize the nature of the work performed and job responsibilities:	

Employer:	Telephone:
Dates Employed:    Start Date:	Current/End Date:
Address:	
Job Title:	
Immediate Supervisor and their Title:	
Starting Hourly Rate/Salary: \$	Final Hourly Rate/Salary: \$
Reason for Leaving:	
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Comments (including explanation of any gaps in employment)

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**Skills & Qualifications** - Summarize any special training, skills, licenses, certificates and/or characteristics of yourself that may qualify you as being able to perform job-related functions for the position which you are applying.

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# Educational Background (if job related)

A. List last three schools attended, starting with the most recent. B. List number of years completed. C. Indicate degree or diploma earned, if any. D. Grade point average or class rank. E. Major and Minor field of study (if applicable).

A. School	B. Years Completed	C. Degree Diploma	D. GPA Class Rank	E. Major	E. Minor

## Foreign Language

List any foreign language(s) you know and check the boxes that describe your skill level.

Language	Speak Some	Speak Fluently	Read	Write

## References

List names and telephone number of three business/work references who are not related to you. If not applicable, list three school or personal references who are not related to you.

Name	Telephone	Years Known

List professional, trade, business, or civic associations and any offices held. (Exclude membership which would reveal sex, race, religion, national origin, age, disability or other protected status.)

Organization	Office Held

List special accomplishments, publications and awards. (Exclude membership which would reveal sex, race, religion, national origin, age, disability or other protected status.)

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List any additional information you would like us to consider.

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# Application for Employment

It is understood and agreed upon that any misrepresentation by me on this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed.

I give the employer the right to investigate all references and to secure additional information about me, if job-related. I hereby release from liability the employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

The employer is an Equal Opportunity Employer. The employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state or federal law.

This application is current for six (6) months. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment it will be necessary to fill out a new application.

I understand that just as I am free to resign at any time, the employer reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the employer has the authority to make any assurances to the contrary.

I understand it is this organization's policy not to refuse to hire a qualified individual with a disability because of this person's need for an accommodation that would be required by the ADA.

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

Date \_\_\_\_\_

## **Please return this completed application to:**

Attn: Human Resources  
Florida Oceanographic Society  
890 NE Ocean Blvd.  
Stuart, FL 34996

Phone: (772) 225-0505

Fax: (772) 225-4725

E-mail: [info@floridaocean.org](mailto:info@floridaocean.org)

Web: [FloridaOcean.org](http://FloridaOcean.org)