



Lydia Gardner
Clerk of the Circuit and County Courts
425 N. Orange Avenue, Suite 530
Orlando, Florida 32802-4994

Human Resources Division
(407) 836-2338
Job Line: (407) 836-0013
Web site: www.myorangeclerk.com

APPLICATION FOR EMPLOYMENT

PLEASE PRINT IN INK OR TYPE. Complete the entire application and No Smoker Affidavit.

Incomplete or unsigned applications will not be processed. An application must be submitted for each position vacancy for which you are applying. A resume will not be accepted in lieu of a completed application. Exceptions will be noted in our job postings.

PERSONAL INFORMATION

Date of Application _____/_____/_____	Social Security Number _____/_____/_____	
Name _____		
(Last)	(First)	(Initial)
Address _____		
(Number and Street)	(City, State, Zip Code)	
Telephone Number (_____) _____	(_____) _____	
(Home)	(Alternate or Cell Phone)	
E-mail Address _____		
Position Applying for _____	Full ____ P/T ____ (Day ____ Evening ____)	

Are you eligible for work in the United States? ____ Yes ____ No

Are you claiming Veteran's Preference? ____ Yes ____ No If yes, please attach copy of Form DD214.

Have you ever been employed with the Orange County Clerk of Courts? ____ Yes ____ No

If "yes," please list the date(s) of your previous employment. _____

Do you have relatives that work for the Orange County Clerk of Courts? ____ Yes ____ No

Name _____ Division _____

Have you been convicted of a First Degree Misdemeanor or Felony? For purposes of this application, conviction applies to a finding of guilt, with or without adjudication of guilt, as a result of a jury verdict, non-jury trial, or entry of a plea of guilty or nolo contendere (non contest). ____ Yes ____ No

If yes, list location of court, nature of offense, and date and disposition of the case. _____

Conviction will not automatically bar you from employment, but will be considered with respect to time, circumstances, seriousness, and the position for which you have applied.

09/7/07

EDUCATION AND TRAINING

	Name of School	City and State	If Applicable Answer Below
High School			Diploma (Y/N) _____ GED Certificate (Y/N) _____
Business, Vocational, or Other School			Major Field of Study _____ Completed? (Y/N) _____ Total Hours _____
College or University			Major _____ Type of Degree _____ Date of Graduation _____

DRIVER LICENSE INFORMATION (Courier and Mental Health Division applicants only)

If a driver license is required for a vacancy, a copy of the license **MUST** accompany this application.

Do you possess a valid driver license? _____ Yes _____ No Expiration Date: ____/____/____

Driver License Type: ____ Operator ____ Non-Commercial ____ Commercial

Class _____ Endorsement _____ State _____

SPECIAL SKILLS

List any language(s) you **SPEAK** or **READ**, other than English (including sign language):

SPEAK _____

READ _____

List any computer software programs that you are proficient in using:

Check the skills in which you are proficient:

_____ Cash Register _____ Data Entry _____ Word Processing _____ Bookkeeping _____ Spreadsheets

_____ Other Skills (please list) _____

How did you learn about the position for which you are applying? (Check the appropriate response)

_____ Visit to Human Resources Division _____ Newspaper _____ Job Line _____ Orange TV _____ Internet

_____ Clerk of Courts Employee (Name of Employee _____)

_____ Other Source (Please Specify _____)

PROFESSIONAL, SCHOOL, OR PERSONAL REFERENCES (Do not list relatives)

Name	Address	Telephone Number
1.		
2.		
3.		

WORK HISTORY

List all employment and volunteer experience including temporary and part-time. **Begin with present or most recent employer.** **Account for all periods,** including unemployment and service in the Armed Forces. If more than one position was held with same employer, list information in the next block(s). **If you were employed under a different name, please enter that name in the right hand margin.**

Employer (Current or Last Employer)		Dates of Employment		Work Performed
		From	To	
Address				
Telephone Numbers (Supervisor)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Hours Per Week			
Reason For Leaving				
Employer		Dates of Employment		Work Performed
		From	To	
Address				
Telephone Numbers (Supervisor)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Hours Per Week			
Reason For Leaving				
Employer		Dates of Employment		Work Performed
		From	To	
Address				
Telephone Numbers (Supervisor)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Hours Per Week			
Reason for Leaving				

Continue on Next Page

Employer		Dates of Employment		Work Performed
		From	To	
Address				
Telephone Numbers (Supervisor)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Hours Per Week			
Reason For Leaving				

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Numbers (Supervisor)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Hours Per Week			
Reason For Leaving				

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Numbers (Supervisor)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Hours Per Week			
Reason for Leaving				

I hereby certify that the information set forth by me in this application is true and correct to the best of my knowledge. I understand that any incorrect, incomplete, or false statements and information may invalidate this application, or subject me to discharge at any time after employment. I authorize the Orange County Clerk of Courts to contact any or all listed employers, schools, and references in order to obtain information necessary to determine my employability. I understand that all job offers with the Orange County Clerk of Courts are contingent upon satisfactory completion of employment verification, a background check, and a physical examination including screening for the presence of illegal narcotic substances. I understand that my employment for the first six months will be on a probationary basis.

Applicant's Signature _____ **Date** _____

THE OFFICE OF LYDIA GARDNER, ORANGE COUNTY CLERK OF COURTS, IS AN EQUAL OPPORTUNITY EMPLOYER AND DOES NOT DISCRIMINATE ON THE BASIS OF RACE, RELIGION, COLOR, AGE, GENDER, NATIONAL ORIGIN OR DISABILITY.



Lydia Gardner
Clerk of the Circuit and County Courts
Orange County • Florida

Human Resources Division

NO SMOKER AFFIDAVIT

ORANGE COUNTY CLERK OF COURTS POLICY 615-SMOKING AND OTHER TOBACCO USAGE

The Clerk of Courts does not allow smoking in any of its offices. Florida law prohibits smoking in public buildings, including restrooms. The Surgeon General of the United States has declared that the use of tobacco or tobacco products is a hazard to an individual's health. The use of tobacco or tobacco products affects an employee's health but also increases the loss experience in group health and life insurance plans, increases premium costs, and decreases employee productivity and efficiency.

In recognition of the inherent dangers and risks of tobacco use, the Orange County Clerk of Courts does not employ individuals who have used tobacco products within the last twelve (12) months. All applicants with the Clerk of Courts must demonstrate abstinence from tobacco or tobacco products for at least one year immediately preceding application, by providing the sworn affidavit included with the employment application. This applies to applicants only and does not affect current Clerk of Court employees.

Have you smoked or used tobacco products within the last 12 months?

Yes

No

I, _____, do hereby affirm that I have not been a user of tobacco products for at least one (1) year immediately preceding my application for employment, in accordance with Employee Handbook Policy 615-Smoking and Other Tobacco Usage, Orange County Clerk of Courts.

Under the penalties of perjury, I declare that I have read the foregoing affidavit and that the facts stated in it are true.

DATED and SIGNED THIS _____ day of _____, 20_____.

Signature of Applicant

09/07/07