



# INSTRUCTIONS

## To complete the City of Gulf Breeze application

1. Complete Application.
2. Sign and Date Application.
3. Complete all blanks and provide all information; please **do not** use "*see resume.*"

### COMMON ERRORS:

- a) Not entering "salary expected."
  - b) Not entering complete address, zip and telephone numbers of references.
  - c) Not entering the city and state of schools attended, date of attendance, graduation, degree and major subject taken.
  - d) Not entering complete employment record, name, address, zip, telephone, position held, dates of employment and reason for leaving.
  - e) Not signing and dating application
4. Mail application to:  
City of Gulf Breeze  
Attn: Human Resources  
P.O. Box 640  
Gulf Breeze, FL 32562
  5. Or fax application to:  
  
(850) 934-5114 Main Fax
  6. **An incomplete application will be rejected.**
  7. Those who wish to submit a resume may do so; however an application must be completed and have the resume as an attachment.



# APPLICATION FOR EMPLOYMENT

**Mail to:**  
CITY OF GULF BREEZE  
P.O. Box 640  
Gulf Breeze, FL 32562

**Phone:** (850) 934-5115  
**Fax:** (850) 934-5114  
**Web Site:** [www.cityofgulfbreeze.com](http://www.cityofgulfbreeze.com)  
**E-Mail:** [lguyer@gulfbreezefl.gov](mailto:lguyer@gulfbreezefl.gov)

Please complete the application in legible handwriting, printing, or type. Please list only one position per application.

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## PERSONAL INFORMATION

\_\_\_\_\_  
Name (Last, First, MI)

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Zip

(\_\_\_\_\_) \_\_\_\_\_

Home Telephone Number

(\_\_\_\_\_) \_\_\_\_\_

Day-time Telephone Number

\_\_\_\_\_  
E-mail address

Valid Florida Driver's License  YES  NO other: \_\_\_\_\_

If under age 18, proof of age and a work permit will be required, and certain positions requiring operation of motorized equipment will not be available. Can you furnish proof/permit if necessary?  YES  NO  NOT APPLICABLE

Proof of eligibility to work in the United States will be required, are you legally eligible to work in the United States?  
 YES  NO

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## EMPLOYMENT INFORMATION

\_\_\_\_\_  
Title of Position for which you are applying

\_\_\_\_\_  
Application Date

\$ \_\_\_\_\_  
Salary Expected

Type of Employment Desired:  Full-Time  Part-Time  Temporary

Will you work hours other than 7:30 to 4?  YES  NO

Will you work schedules other than Monday thru Friday?  YES  NO

Will you accept temporary work?  YES  NO

Have you ever been employed by the City of Gulf Breeze before?  
(If "yes", please give dates and explanation)  YES  NO

Have you ever been discharged from employment because your work or conduct was not satisfactory?  YES  NO

Have you ever been convicted of a felony in the last seven (7) years?  YES  NO  
If "yes", please give dates and explanation) \*\*Note: conviction does not necessarily bar you from employment

**REFERENCES:** List three (3) persons, other than relatives who have knowledge of your work experience and/or education.

Name	Address	Phone # (Day) and email
1.		
2.		
3.		

**EDUCATION AND TRAINING**

School	Circle Highest Grade Completed	Did you Graduate?	Name and Location of School Last Attended		
High School	9 10 11 12				
Names of School(s) Location (City and State)		Dates Attended	Did you Graduate? Yes/No	Degree	Major Subject
College					
College					
Vo-Tech					
Licenses/CDL Class					
Other Certifications Federal or State					

**EMPLOYMENT RECORD**

Employer's Name Address & Phone	Supervisor's Name And Title	Position Held Title/Duties	Dates Employed		Reason For Leaving
			FROM	TO	
<i>Please, start with your present position.</i>					

**Please list any special knowledge/skills/abilities that you possess pertinent to the position:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Applicant's Statement: I certify that all information and statements given on this application are true and correct to the best of my knowledge and agree to be bound thereby. I hereby give consent to duly authorized representatives of the City of Gulf Breeze to contact any former employers, educational institutions indicated, and any other persons or organizations that it determines might have information relevant to this application. I further give consent to said organizations to divulge relevant information to the City of Gulf Breeze, notwithstanding that it might otherwise be confidential, such as records of disciplinary proceedings. I understand that any information obtained by the City of Gulf Breeze in the course of those contacts will be treated confidences. I understand that by accepting this application, the City incurs no liability for my future employment and that acceptance of an offer of employment does not create a contractual obligation upon the City to continue employment in the future. In the event of employment, I understand that false or misleading information given on the application or in an interview may result in discharge. If employed, I agree to abide by the work rules and regulations of the City of Gulf Breeze, Laws of the State of Florida, and applicable Federal Laws and Regulations.

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

\_\_\_\_\_  
Date

The City of Gulf Breeze is a Tobacco and Drug-Free Workplace Employer and requires applicants and employees to submit to Drug Testing. The City is an Equal Employment Opportunity Employer and will consider all applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status. Individuals who require accommodations in order to complete the employment application process should contact the Human Resources Manager at the phone number, or mailing address listed above. The City participates in E-Verify.

**EQUAL EMPLOYMENT OPPORTUNITY  
APPLICANT SURVEY INFORMATION**

The information is requested on a voluntary basis. This information will be used for research, analysis, and to evaluate the effectiveness of our recruiting efforts. The information in no way affects you as an individual applicant and will not be used in making an employment decision.

Position applied for: \_\_\_\_\_

Please check the category that applies:

**Age Group**

- Under 18 years of age  
 18-40 years of age  
 Over 40 years of age

**Gender**

- Male       Female

**Race/Ethnic Identification**

- White       Black       Hispanic       Asian or Pacific Islander  
 American Indian or Alaskan Native