



## Application for Employment

### General Information and Instructions:

- CareerSource Tampa Bay is the employer of record for all individuals who work as employees.
- CareerSource Tampa Bay is an equal opportunity employer and does not discriminate on the grounds of race, color, religion, sex, national origin, age, disability, marital status, political affiliation, beliefs, or any other protected category.
- To be considered for employment, please fill in all blanks on this application by printing in ink or typing. If any question is not applicable, write "NA" in the space provided. Résumés will not be needed. Applicants may submit a résumé in addition to completing an application; however, résumés may not be submitted in place of an application. Please note: only completed applications will be considered for employment. Do not write, "See attached resume," anywhere on the application, as the application will not be considered complete.
- All information you submit is subject to verification, including contacting your previous employer(s).
- If you require special disability accommodations to apply for a job, please notify the HR Department in advance at (813) 397 2021.
- This Application for Employment is a fillable PDF form. You can complete the form by typing (or selecting a drop-down box) directly on the form. If you are applying for more than one position, complete one form for each position.
- **IMPORTANT: To save your completed application form, click File -> Save As -> "Employment Application – [First Name Last Name] – [Job Title]"**
  - Submit completed and signed form via email to: [applications@careersourcetampabay.com](mailto:applications@careersourcetampabay.com)
  - Subject line reads: "CareerSource Tampa Bay Employment Application – First Name Last Name"
- Or submit completed and signed form to:

CareerSource Tampa Bay  
Attn: HR Department  
4902 Eisenhower Blvd., Ste. 250  
Tampa, FL 33634



Application Date: \_\_\_\_\_ (This application will remain active for 60 days from the date of application)

**PERSONAL INFORMATION:**

Name: \_\_\_\_\_  
*Last* *First* *Middle*

Mailing Address: \_\_\_\_\_ Apt: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Alternate #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Are you under 18 years old? Yes \_\_\_\_\_ No \_\_\_\_\_

*If yes, you may need to furnish a valid work permit.*

Are you legally authorized to work in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

*If a conditional offer of employment is made, you will be required to provide identification and proof of citizenship or authorization to work in the United States.*

**JOB RELATED INFORMATION:**

Position for which you are applying: \_\_\_\_\_

Are you seeking full-time or part-time employment? Full-time \_\_\_\_\_ Part-time \_\_\_\_\_

Minimum salary acceptable: \$ \_\_\_\_\_ per hour

Would you be willing to consider a position that is temporary? Yes \_\_\_\_\_ No \_\_\_\_\_

Earliest date you are available to start work: \_\_\_\_\_

Are you currently employed? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you on layoff and subject to recall? Yes \_\_\_\_\_ No \_\_\_\_\_

Can you travel if it is a requirement of the job? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have reliable transportation that will enable you to get to work on time? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you available to work overtime on short notice when necessary? Yes \_\_\_\_\_ No \_\_\_\_\_



Have you previously worked for CareerSource Tampa Bay, CareerSource Pinellas, or their predecessors, WorkNet Pinellas or Tampa Bay Workforce Alliance? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please provide the following details:

Company Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

Employed from (MM/YYYY): \_\_\_\_\_ through \_\_\_\_\_

To your knowledge, do you have any relatives working at CareerSource Tampa Bay?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please provide the following details:

Name of your relative: \_\_\_\_\_

Job Title: \_\_\_\_\_

Employed from (MM/YYYY): \_\_\_\_\_ through \_\_\_\_\_

**EDUCATION:**

If your name while attending any of the schools below was different from the name on the first page of this application, please provide the different name(s): \_\_\_\_\_

High School			
Name of School	Location (City/State)	Major/Minor course of study	Type of degree earned

College, University, or Professional School: (transcripts may be required)			
Name of School	Location (City/State)	Major/Minor course of study	Type of degree earned

Job related training or course work: (vocational, apprenticeship, military, etc.)				
Name of School	Location	Major/Minor course of study	Certificate earned?	
			Yes	No

**LICENSURE, REGISTRATION, CERTIFICATION:** (Examples: Microsoft certification, CPA, etc.)

Name of license, registration, certificate	Number	Expiration Date	State Licensing Agency

**ACADEMIC OR PROFESSIONAL RECOGNITION OR AWARDS:**

Name of award or recognition	Award received from

**KNOWLEDGE, SKILLS, OR ABILITIES:**

List the knowledge, skills, and abilities you possess that are relevant to the position for which you are applying. (Examples include: specific computer skills, fluency in language(s), etc.)

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**EMPLOYMENT HISTORY:**

Provide your employment history for the past ten years. Begin with your current or most recent job and use a separate block to describe each position or gap in employment. Attach additional sheets using the same format if necessary.

**1** Name of current or last employer: \_\_\_\_\_

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

Employed from (MM/YYYY): \_\_\_\_\_ through: \_\_\_\_\_

Your last job title: \_\_\_\_\_ Hours worked each week: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Supervisor's email address: \_\_\_\_\_

Your duties and responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Did you voluntarily leave this employer? Yes \_\_\_\_\_ No \_\_\_\_\_ If No, explain situation on a separate sheet of paper.

Your name if different during this employment period: \_\_\_\_\_

**2** Name of previous employer: \_\_\_\_\_

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

Employed from (MM/YYYY): \_\_\_\_\_ through: \_\_\_\_\_

Your last job title: \_\_\_\_\_ Hours worked each week: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Supervisor's email address: \_\_\_\_\_

Your duties and responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Did you voluntarily leave this employer? Yes \_\_\_\_\_ No \_\_\_\_\_ If No, explain situation on a separate sheet of paper.

Your name if different during this employment period: \_\_\_\_\_



**EMPLOYMENT HISTORY:** *(continued)*

**3** Name of previous employer: \_\_\_\_\_

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

Employed from (MM/YYYY): \_\_\_\_\_ through: \_\_\_\_\_

Your last job title: \_\_\_\_\_ Hours worked each week: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Supervisor's email address: \_\_\_\_\_

Your duties and responsibilities: \_\_\_\_\_

\_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Did you voluntarily leave this employer? Yes \_\_\_\_\_ No \_\_\_\_\_ If No, explain situation on a separate sheet of paper.

Your name if different during this employment period: \_\_\_\_\_

**4** Name of previous employer: \_\_\_\_\_

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

Employed from (MM/YYYY): \_\_\_\_\_ through: \_\_\_\_\_

Your last job title: \_\_\_\_\_ Hours worked each week: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Supervisor's email address: \_\_\_\_\_

Your duties and responsibilities: \_\_\_\_\_

\_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Did you voluntarily leave this employer? Yes \_\_\_\_\_ No \_\_\_\_\_ If No, explain situation on a separate sheet of paper.

Your name if different during this employment period: \_\_\_\_\_



**BACKGROUND INFORMATION:**

A “yes” answer to any of these questions will not automatically exclude you from consideration for employment. The nature, job-relatedness, severity, and date of the offense in relation to the position for which you are applying will be taken into consideration.

Have you ever been convicted of a felony, including any conviction where you pled nolo contendere (no contest)? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been convicted by a military court martial? Yes \_\_\_\_\_ No \_\_\_\_\_

Is your driver’s license currently suspended or revoked? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you currently on probation or parole? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been a defendant in a civil action for intentional tort? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, please identify the nature and disposition of the action.

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If you answered “Yes” to any of the questions in the Background Section above, please provide further details. Attach additional pages if necessary.

What was the charge for which you were convicted? *(If more than one conviction, use additional pages.)*

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When were you convicted? \_\_\_\_\_

Were you confined/imprisoned as a result of your conviction? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, when were you released from confinement/imprisonment? \_\_\_\_\_

If your driver’s license is currently suspended or revoked, when will it be reinstated to full driving privileges?

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If you are currently on probation or parole, when is it scheduled to end? \_\_\_\_\_

If you are currently under charges for any felony violation of law, when are you scheduled to go to court?

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Are you subject to any restrictive covenants which might impact your ability to work for CareerSource Tampa Bay, such as a non-solicitation or non-compete agreement? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please provide further details: \_\_\_\_\_



**APPLICATION CERTIFICATION:** *(Please read carefully before signing)*

I understand that any omissions, falsifications, misstatements, or misrepresentations in my application may disqualify me from further consideration for employment, and, if I am hired, may result in my dismissal if discovered at a later date.

I understand that any information I give may be investigated as allowed by law. I agree to cooperate in a thorough investigation of all statements made herein and on any attachments provided and other matters relating to my background, abilities, and qualifications. I understand that any investigation conducted may include a request for employment and educational history, credit reports, consumer reports, driving record, and criminal history. I authorize any person, school, current and former employer, consumer reporting agency, and any other organization or agency to provide information relevant to such investigation, and I hereby release all persons and corporations requesting or supplying information pursuant to such investigation from any and all liability of whatever kind and nature, which, at any time, could result from obtaining and having an employment decision based on such information. I understand that I have the right to make a written request within a reasonable period of time for complete disclosure of the nature and scope of any investigation.

I understand that this application; the policies, rules, and regulations of CareerSource Tampa Bay; anything said during an interview process; the job offer letter; or any subsequent employment does not create an employment contract nor guarantee employment for any definite period of time. I understand that if hired, I retain the option, as does CareerSource Tampa Bay, of ending my employment at any time, with or without notice and with or without cause. As such, I understand that my employment is "at-will."

I understand that should an employment offer be extended to me and accepted, that I will fully adhere to all existing and future policies, rules, regulations, and the Personnel Handbook of CareerSource Tampa Bay and understand that CareerSource Tampa Bay reserves the right to change wages, benefits, hours, job duties, location of work, and working conditions as deemed necessary.

I understand that any offer of employment is contingent upon successful completion of a urinalysis drug screen, criminal background check, and an assessment of my skills. I give my consent to these screenings. I understand that should I refuse to participate, I will not be considered for employment.

I acknowledge by my signature below that I have read and understand this application certification, and I confirm that all information provided in this employment application and all attachments, including my resume, are true, correct, and complete, and no requested information has been concealed.

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Signature of Applicant

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Date

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Printed Name of Applicant