

CITY EMPLOYMENT

(Complete only if you are currently employed or were previously employed by the City of Jacksonville)

Name: _____

Position: _____

Current City Employee: Yes No Agency: _____

Date of Employment: _____ Title: _____

(I understand that a City employee who is later hired from an open eligibility list in a different position does not have reversion rights to the former position.)

Retired City Employee: Yes No Agency: _____

(I understand that a retired City employee is NOT eligible to receive pension benefits while employed with the City in either a full-time or part-time position.)

CERTIFICATION DATA

Have you been certified by the State of Florida for the position for which you are applying?

Yes No If yes, complete the following:

Training Center Attended / Attending: _____

Telephone Number: _____ Location: _____

Type of Training Received	Course Length (Hours)	From/To
1. Basic Recruit	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____

Type of Certificate held: _____

Have you ever worked under a temporary employment authorization? If yes, when and where?