



Town of St. Leo
 P.O. Box 2479
 34544 SR 52
 Saint Leo, FL 33574

Employment Application

mail or email to: townclerk@townofstleo-fl.gov

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ City State ZIP Code

Phone: _____ Email: _____

Date Available: _____ Social Security No.: _____ Desired Salary: \$ _____

Position Applying for: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you been employed here before? YES NO If yes, when? _____

Do you have a valid driver's license? YES NO Number _____

Has your license ever been revoked or suspended? YES NO

If yes, when and for what reason? _____

Education

High School: _____ Address: _____
 Did you graduate? YES NO Diploma: _____

College: _____ Address: _____
 Did you graduate? YES NO Degree: _____

Other: _____ Address: _____
 Did you graduate? YES NO Degree: _____

References

Please list three references.

Full Name: _____ Relationship: _____
 Company: _____ Phone: _____
 Address: _____

Full Name: _____ Relationship: _____
 Company: _____ Phone: _____
 Address: _____

Full Name: _____ Relationship: _____
 Company: _____ Phone: _____
 Address: _____

Previous Employment

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____
Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____
Full-time? YES NO Part-Time? YES NO

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____
Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____
Full-time? YES NO Part-Time? YES NO

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____
Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____
Full-time? YES NO Part-Time? YES NO

May we contact your previous supervisor for a reference? YES NO

Skills and Qualifications

Summarize any training, skills, licenses and/or certification that may qualify you for this position:

Military Service

Branch: _____ From: _____ To: _____

Disclaimer and Signature

I certify that there are no misrepresentations, omissions, or falsifications in the foregoing statements and answers and the entries made by me are true, complete and correct to the best of my knowledge and belief.

I hereby authorize the Town of St. Leo to verify all information contained herein, and I release all past employers and all referenced from any and all liability for the release of information to the Town of St. Leo.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my termination.

I understand that nothing in this application, or in any prior or subsequent written or oral statement, creates a contract of employment or any rights in the nature of a contract.

I agree and understand that if I am hired by the Town of St. Leo, my employment will be at-will, for an indefinite period of time, and may be terminated at any time, with or without cause or notice, at the option of the Town of St. Leo or myself.

I understand that I have the right to end my employment at any time and that the Town of St. Leo retains that same right.

Signature: _____ Date: _____

The Town of St. Leo is an Equal Opportunity Employer. Qualified applicants are considered for employment and treated without regard to race, color, national origin, sex, age, disability, marital status, religious creed, sexual orientation, political affiliation, Veteran Status (Except for Veteran's preference), or the presence of a non-related medical condition or handicap.