

City of Cocoa Beach

P.O. Box 322430, Cocoa Beach, FL 32932-2430

Phone: (321) 868-3272 or FAX (321) 868-3226

Employment Application

The City of Cocoa Beach is an equal opportunity employer, maintains a drug-free workplace and complies with Affirmative Action and ADA guidelines. In order to receive consideration for employment with the City, the application must be completed in full, signed and dated. Please type or print in a legible manner. Answer all questions, indicating "none" where applicable. Applications remain on active status for six (6) months from date of application.

Personal Information

Last Name	First Name	Middle	Maiden or Other Last Names Used
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Present Street Address	City	State	Zip
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Home Phone #	Business Phone #	Cell Phone #	Driver's License #	D/L State
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Email Address	Are You Age 18 or older?	Are You a U.S. Citizen?	Brevard County Resident for how long?
	YES NO	YES NO	

Hiring Information

Position Desired	Desire Full or Part Time?	Date Available	Requested Work Hours	Salary Requirements
				\$ per

Can you perform the essential functions of the position for which you are applying with reasonable accommodations? YES NO

Specify any accommodations required:

Previously employed with the City? If yes, Job Title	From (Mo/Yr)	To (Mo/Yr)	Name any Relatives employed by the City – Relationship
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Training and Education

High School Name	City	State	Did you graduate?
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Colleges attended	Location (City/State)	Dates attended	Major	Degree Obtained
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Job related licenses or certificates	Date Issued	Is it current/up-to-date?	Licensing or certification agency
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Job related skills: those that apply

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|--------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|
| Word Processing software
Spreadsheet programs
Database programs
Date entry/CRT
Typing _____ WPM
Ten Key
Accounts Payable | Accounts Receivable
Bookkeeping
Purchasing
Payroll
Cashier
Budgeting
Switchboard/Receptionist | Commercial driver's license
Light equipment operation
Heavy equipment operation
Equipment maintenance
Equipment repair
Landscaping/grounds maintenance
Carpentry/Construction | Electrical
Plumbing
Roadway paving/repair
Building code/inspector
Surveying
Zoning
Blueprint/Drafting/CAD | Manual Labor
Machinist
Stormwater/sewer
Irrigation
Recreation programs
Food Service
Janitorial |
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Employment History

Start with present or most recent employer – must include all full-time and part-time employment.

Employer Name		Phone	
Address		City	State Zip
Dates of Employment ~ From: To:		Starting Salary:	Ending Salary:
Job Title	Supervisor's name	Reason for Leaving	
Describe main duties			

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Explain any gaps in employment history:

Are there any employers above that you don't want us to contact?	Don't contact (employer name)	Reason
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Background Information

Have you ever applied for and been refused a bond? YES NO Initials _____
If you answered "YES", please provide details:

Have you ever been convicted of a felony or a First Degree Misdemeanor? YES NO Initials _____
If "YES", what charges?

Where convicted? Date of Conviction:

Have you ever pled nolo contendere or plead guilty to a crime which is a Felony or a First Degree Misdemeanor? YES NO Initials _____
If "YES", what charges?

Where? Date of Charge:

Have you ever had the adjudication of guilt withheld for a crime which is a Felony or a First Degree Misdemeanor? YES NO Initials _____
If "YES", what charges?

Where? Date of charge:

NOTE: A "YES" answer to these questions will not automatically bar you from employment. The nature, job-relatedness, severity and date of the offense in relation to the position for which you are applying are considered.

Additional job-related Information

Comment on any additional skills, experience or accomplishments that relate to the position for which you are applying. Some examples are skills with machinery or equipment, writing or public speaking experience, membership in professional organizations, etc.

References: (People who know of your qualifications and fitness for the position – no relatives or supervisors)

Name	Address	Phone

