MEDICAL EXAMINER District Six

Pasco & Pinellas Counties



10900 Ulmerton Road Largo, FL 33778 727-582-6800 (Fax 727-582-6820) www.forensics.pinellas.gov

Application for Employment

Please Print or Type

This organization is an equal opportunity and Drug Free Workplace employer. We do not discriminate against any applicant for employment or employee with respect to hire, tenure, terms, conditions or privileges of employment or any matter directly or indirectly related to employment because of age, sex, race, color, religion, national origin, ancestry or physical handicap (except where based on a bonafide occupational qualification). Job applicants will be tested for the presence of drugs pursuant to Chapter 440.102 Florida Statutes.

Position(s) applied for				Date of App	Date of Application		
Name			Social Security #				
	Last	First	Middle				
Address							
	Street		City	State	Zip		
Telephone							
Have you ever been e	mployed here before	ore? If Yes, gi	ve position and dates.			Yes / No	
Are you legally eligib	le for employmen	t in the U.S.?				Yes / No	
Date available for wo	rk		Type of employment sought	t? Full Time /	Part-Time		
Driver's license numb	er if driving is an	essential job f	function.				
Have you ever pled "guilty" or "no contest", or been convicted of a crime?					Yes / No		
If Yes, please provide							
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Answering YES to these questions does not constitute an automatic bar to employment. Factors such as date of offense, seriousness and nature of the

Employment History

Provide the following information of your past ten (10) years of employment, assignments or volunteer activities, starting with the most recent. Attach Curriculum Vitae or resume if available. Attach additional pages if necessary.

additional pages if nec	cssai y.				
Employer		Tele	phone #		
Address					
Summarize the nature of	f the work and	job responsibiliti	ies		
YES / NO / Later					
Salary or hourly rate	Start	Per-	Ending	Per-	
Employer		Tele	phone #		
Address					
Summarize the nature o	f the work and	job responsibiliti	ies		
YES / NO / Later					
Salary or hourly rate	Start	Per-	Ending	Per-	
Employer		Tele	ephone #		
Address					
Summarize the nature o	f the work and	job responsibiliti	ies		
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	cations	Summarize any training, skills,		
Skills and Qualifi	Cations	able to perform job-related func	tions in the position for whic	h you are applying.
Educational Back	ground	(if Job Related)		
Name and Location	# Years	Did you graduate? Degree?	Course of Study	
High School		, , ,		
College				
Other				
References				
Name and Address			Talanhana	Years Known
Name and Address			Telephone	i ears Known
Applicant Statem	ent			
certify that all information I have pr	ovided in order	to apply for and secure work wit	h the employer is true, co	mplete and accurate.
understand that any information are	wided by me the	t is found to be folso incomplete	or microprocented in any	recencet will be sufficien
understand that any information pro ause to (1) cancel further considerati				
iscovered.	11	, ()	5 1 7	,
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