

Office of the Tax Collector, Palm Beach County  
Anne M. Gannon, Tax Collector  
P.O. Box 3715  
West Palm Beach, FL 33402-3715



## Application for Employment

The Office of the Tax Collector, Palm Beach County, is an equal opportunity/veterans' preference employer.  
Upon request, this form can be made available in an alternative format.

*PLEASE TYPE OR PRINT CLEARLY*

### PERSONAL HISTORY:

Name \_\_\_\_\_ Social Security Number # \_\_\_\_\_

Present Street Address \_\_\_\_\_

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

Home Telephone Number \_\_\_\_\_ Other Telephone Number \_\_\_\_\_

Position Applied for \_\_\_\_\_ Salary Required \_\_\_\_\_

#### *Complete only if position requires driving:*

Do you have a valid Florida license?  Yes  No

Has your license ever been suspended or revoked?  Yes  No

Location Preferred:  Belle Glade  Delray Beach  Lake Worth  
 Palm Beach Gardens  Royal Palm Beach  West Palm Beach

Palm Beach County resident?  Yes  No

*Residents of Palm Beach County are given preference in filling vacancies, other considerations being equal.*

Are you related to anyone working in the Office of the Tax Collector?  Yes  No

If yes, give name and relationship: \_\_\_\_\_

Are you at least 18 years of age?  Yes  No

How did you learn of this employment opportunity? \_\_\_\_\_

Do you have the legal right to work in this country?  Yes  No

Have you ever been convicted of a crime, had adjudication of a crime withheld or pled nolo contendere to a crime?  Yes  No

If yes, please explain: \_\_\_\_\_

*Note: A conviction will not necessarily be a bar to employment. Each situation and explanation will be considered in relation to the position for which you are applying.*

Are you available to work Monday through Friday, 8:00 a.m. - 5:00 p.m.?  Yes  No

Are you able to work overtime, if required?  Yes  No

Have you ever claimed and been employed through Veterans' Preference?  Yes  No

If yes, give the name and address of employer: \_\_\_\_\_

If not, are you claiming Veterans' Preference?  Yes  No

*You must submit current documentation of your Veterans' Preference status with this application.*

**EDUCATION HISTORY:**

<u>School</u>	<u>Location</u>	<u>Did You Graduate?</u>	<u>Degree</u>	<u>Major</u>	<u>GPA</u>
---------------	-----------------	--------------------------	---------------	--------------	------------

_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

List any special skills, knowledge or ability you possess which may be relevant to the position applied for (i.e. knowledge of computer hardware/software): \_\_\_\_\_

\_\_\_\_\_

Typing Speed: \_\_\_\_\_

List any professional or occupational licenses, certifications, memberships you currently hold that may be relevant to the position applied for: \_\_\_\_\_

\_\_\_\_\_

**EMPLOYMENT HISTORY:**

*List all employment beginning with your most recent position.*

May we contact your present employer?     Yes     No

Company \_\_\_\_\_ Type of Business \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

Supervisor \_\_\_\_\_ Salary \_\_\_\_\_

Hours Per Week \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Job Title/Responsibilities \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

\_\_\_\_\_

Company \_\_\_\_\_ Type of Business \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

Supervisor \_\_\_\_\_ Salary \_\_\_\_\_

Hours Per Week \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Job Title/Responsibilities \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

\_\_\_\_\_

Company \_\_\_\_\_ Type of Business \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

Supervisor \_\_\_\_\_ Salary \_\_\_\_\_

Hours Per Week \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Job Title/Responsibilities \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

\_\_\_\_\_

Company \_\_\_\_\_ Type of Business \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

Supervisor \_\_\_\_\_ Salary \_\_\_\_\_

Hours Per Week \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Job Title/Responsibilities \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

\_\_\_\_\_

**APPLICATION MUST BE SIGNED ON THE REVERSE**

**AUTHORIZATION/AGREEMENT**

I hereby authorize the Office of the Tax Collector, Palm Beach County (hereinafter referred to as Tax Collector), and/or someone on its behalf to investigate my personal, employment, educational, criminal, driving or other background as may be necessary to arrive at an employment decision. I hereby release employers, schools and individuals from all liability in responding to inquiries in connection with my application and request that all those contacted provide to the Tax Collector full and candid information.

I understand that, in accordance with Public Records Law, Chapter 119, F.S., information provided on this application may be “inspected and examined by any person desiring to do so, at any reasonable time, under reasonable conditions, and under supervision by the custodian of public record or ... designee.”

Should I be selected for employment, I understand that:

- 1) Any employment will be on a training basis for a period of 90 calendar days from the date of hire. Completion of the training period will not result in an employment contract or employment for any specific term.
- 2) Any employment with the Tax Collector is contingent upon proof of legal authorization to work in the United States. If hired, I must provide the necessary authorization documents within three (3) business days of hire.
- 3) Employment with the Tax Collector shall be solely on an at-will basis.

I hereby affirm that the information provided on this application or during interview(s) to be true and complete and acknowledge that false information or omissions may disqualify me from further consideration and may result in termination of employment if discovered at a later date. I also understand that should I become employed by the Tax Collector that I am required to abide by all rules and regulations of the Office of the Tax Collector.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Mail Completed Application To:  
Office of the Tax Collector, Palm Beach County  
P.O. Box 3715  
West Palm Beach, FL 33402-3715  
ATTN: Human Resources