

Last

Name \_

Date	
Expires in 30 days	

Middle

## **APPLICATION FOR EMPLOYMENT**

First

Present Address	How long haveyou lived there?			
	/State	you	Years	Months
Telephone No	Posi	tion you are	applying for?	
E-mail Address		Text Message Address		
Are you 18 years of age or older? Ye	s 🗆 No 🗆			
Have you ever worked for Panama C	ity Port Authority before?	Yes □ No [	<b>_</b>	
If Yes, please give dates and	position:			
Do you have any friends or relatives	working here?			
If Yes, Name:		F	Relationship:	
Have you ever pled guilty or "no cont deferred or do you have any criminal If Yes, please give date and	charges pending? Yes E	□ No □	,	
Please list the names of your present account for <u>all</u> periods of time including Present or Past Employer			Position	nployer listed first. Be sure to  Reason for leaving
Address	То			
City /State/Zip				
Supervisor				
Telephone Previous	From	Pay Rate	Position	Pageon for looving
Employer	FIOIII	ray Nate	FOSITION	Reason for leaving
Address	T-	_		
City /State/Zip	То			
Supervisor				
Telephone				
Previous Employer	From	Pay Rate	Position	Reason for leaving
Address				
City /State/Zip	То			
Supervisor				
Telephone				

Previous Employer			From	Pay Rate	Position	Reason for leaving
Address						
City /State/Zip			То			
Supervisor						
Telephone				Davi Data	Decition.	Decree for leading
Previous Employer			From	Pay Rate	Position	Reason for leaving
Address			То	-		
City /State/Zip						
Supervisor						
Telephone						
Have you ever been terminated? ☐ Yes ☐ No If Yes, please explain circumstances:						
——————————————————————————————————————	any gapo in y					
EDUCATION						
	School Na	ame/ Location	Years Co	mpleted	Degree	Study or Major
Elementary						
High School						
College/ University						
Graduate/ Professional						
Trade / Correspondence						
Other						
PERSONAL REFERENCES						
(No relatives)		<u> </u>	۸ ۸	droce	Tolophono Number	
Name		Relationship		Au	dress	Telephone Number

This application will be considered active for a maximum of thirty (30) days. If you wish to be considered for employment after that time, you must reapply.

I HEREBY CERTIFY that all of the information that I have	provided in this application is true and accurate.
Date	Signature of Applicant
The Panama City Port Authority is an equal opportunity en religion, sex, age, citizenship, marital status, disability, or r	
APPLICAN  I understand that if I am hired, my employment will be for no define understand that I have the right to terminate my employment at we same right. No one other than the Upper Management of the Po	RTUNITY EMPLOYER T'S STATEMENT nite period, regardless of the period of payment of my wages. I furthe will at any time with or without notice or reason, and the Port has the art has authority to modify this relationship or make any agreement to
to submit to an alcohol test and/or medical examination to the ex my previous employers and I authorized those employers to disc employment with them. I release my previous employers from an	mit to a drug test at any time and also reserves the right to require me tent permitted by law. I further understand that the Port may contact
I further understand that if employed I will be on a 90-day introdu during that period will not result in any Port responsibility for uner introductory period does not confer any expectation of continued definite period and "at-will".	
	I provide on this application and in any interview will be true, complete information is later found to be false or misleading in any respect, I will
obtain such a report or reports for use in connection with my app hired, this authorization shall remain on file and serve as ongoing reports at any time during my employment. I understand that the criminal background checks, Department of Motor Vehicle report electronic inquiry related to my background, including review of a decisions as a result of such inquiries. I further understand that tinformation on my character, general reputation, personal character.	e term "consumer report" included, but is not limited to, credit checks, s, and investigative consumer reports. I authorize the Port to conduct all social networking sites and Internet sites and to make adverse
I also authorize the Panama City Port Authority to obtain in listed on this application, as per paragraph two above.	nformation from, but not limited to, all the previous employers
Signature of Applicant	Date
Print Name	