

Thank you for your interest in Monroe County!

In order to avoid unnecessary delays in the application process please make sure the following steps are completed and included in your application packet.

- Sign and date all attachments

Please use a digital signature by typing your name in signature fields. Physical signatures are not necessary at this time and will be requested if hired.

- Include additional documents

- Supporting documentation if using Veterans Preference. A list of required documents for each Veterans Preference category can be found at

<http://floridavets.org/wp-content/uploads/2014/06/Veterans-Preference-Frequently-Asked-Questions.pdf> .

- Authorization of Credentials Check. This is a separate form and is included in the application package.

- Any optional documents such as your resume, cover letter, and Certifications.

- A copy of your driving record (if you have not been a Florida resident for the past 3 years.)

### **APPLICATIONS ARE ACCEPTED VIA EMAIL ONLY**

Please submit all documents to Human Resources

[Careers@monroecounty-fl.gov](mailto:Careers@monroecounty-fl.gov)

Please note:

- This application must be completed using Adobe Reader X (or later) or Adobe Pro X (or later).

- This application is not compatible with the Preview application on Apple Computers. Please be sure that Adobe Pro or Adobe reader is used.

- For Troubleshooting or questions about this application please contact:

Human Resources - Recruiting

[Careers@monroecounty-fl.gov](mailto:Careers@monroecounty-fl.gov)

(305) 292-4557

- If you are chosen for any position that requires a degree you will be required to provide official transcripts during the hiring process.

- This Application will remain on file for one year, and will be used for multiple vacancies throughout that year. **Please do not return multiple applications.** You may contact Human Resources to have your application re-submitted during that time.

- Please attach any additional Information (resumes, cover letters, etc.) to the same e-mail as your application or credentials check.

## **ATTENTION**

Effective January 1, 2015 Monroe County BOCC will not hire those who use tobacco products and individuals must remain tobacco free while employed with Monroe County BOCC. Tobacco products are defined as cigarettes, cigars, pipe tobacco, snuff, dip, electronic or e-cigarettes that contain nicotine or any other product that contains tobacco or nicotine. Nicotine replacement products such as gum or patches are also considered tobacco products.

# APPLICATION FOR EMPLOYMENT

Please complete Application with ALL Attachments

## MONROE COUNTY HUMAN RESOURCES

1100 Simonton Street 2nd Floor  
Key West, FL 33040  
(305) 292-4557

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

<b>Position(s) Applied For:</b>				<b>Date of Application:</b>			
<b>How did you learn about us?</b>							
<input type="checkbox"/> Newspaper	<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Friend	<input type="checkbox"/> Relative	<input type="checkbox"/> Walk-In	<input type="checkbox"/> Channel 76	<input type="checkbox"/> Internet	<input type="checkbox"/> Other
<b>Last Name:</b>			<b>First Name:</b>			<b>Middle Name:</b>	
<b>Address:</b>				<b>City:</b>		<b>State:</b>	<b>Zip:</b>
<b>Primary Phone:</b>		<b>Alternate Phone:</b>		<b>Email Address:</b>			

If you are under 18 years of age, can you provide required proof of your eligibility to work?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever filed an application with us before?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If Yes, give date(s)			
Have you ever been employed with us before? Yes No		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If Yes, give date(s)			
Are you currently employed?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
May we contact your present employer?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? <i>Proof of citizenship or immigration status will be required upon employment.</i>		<input type="checkbox"/> Yes	<input type="checkbox"/> No
On what date would you be available for work?			
Are you available to work:			
Are you currently on "lay-off" status and subject to recall?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Can you travel if a job requires it?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you been convicted of a felony within the last 7 years? <i>Conviction will not necessarily disqualify an applicant from employment.</i>		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If Yes, please explain			
Are you attaching a resume? <i>It is not required.</i>		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		If Yes, how many pages?	

**WE ARE AN EQUAL OPPORTUNITY EMPLOYER**

<b>Attachments:</b>			
Statement of Agreement	1	No Tobacco Use Policy	4
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## EDUCATION

	Name & Address of School	Course of Study	Years Completed	Diploma / Degree
Elementary School				
High School				
Undergraduate College				
Graduate / Professional				
Other (Specify)				

### **Indicate any foreign languages you can speak, read and/or write**

PROFICIENCY	LANGUAGE	FLUENT	GOOD	FAIR
SPEAK				
READ				
WRITE				

### **Describe any specialized training, apprenticeship, skills, and extra-curricular activities:**

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### **Describe any job-related training received in the United States military:**

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# EMPLOYMENT EXPERIENCE

**Start with your present or last job.** Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1. <u>Employer:</u>	<u>Employment Dates:</u>		<u>Work Performed:</u>
	<u>From:</u>	<u>To:</u>	
<u>Address:</u>			
	<u>Hourly Rate/Salary:</u>		
<u>Telephone Number:</u>	<u>Starting:</u>	<u>Final:</u>	
<u>Job Title:</u>	<u>Supervisor:</u>	<u>Reason For Leaving:</u>	

2. <u>Employer:</u>	<u>Employment Dates:</u>		<u>Work Performed:</u>
	<u>From:</u>	<u>To:</u>	
<u>Address:</u>			
	<u>Hourly Rate/Salary:</u>		
<u>Telephone Number:</u>	<u>Starting:</u>	<u>Final:</u>	
<u>Job Title:</u>	<u>Supervisor:</u>	<u>Reason For Leaving:</u>	

3. <u>Employer:</u>	<u>Employment Dates:</u>		<u>Work Performed:</u>
	<u>From:</u>	<u>To:</u>	
<u>Address:</u>			
	<u>Hourly Rate/Salary:</u>		
<u>Telephone Number:</u>	<u>Starting:</u>	<u>Final:</u>	
<u>Job Title:</u>	<u>Supervisor:</u>	<u>Reason For Leaving:</u>	

4. <u>Employer:</u>	<u>Employment Dates:</u>		<u>Work Performed:</u>
	<u>From:</u>	<u>To:</u>	
<u>Address:</u>			
	<u>Hourly Rate/Salary:</u>		
<u>Telephone Number:</u>	<u>Starting:</u>	<u>Final:</u>	
<u>Job Title:</u>	<u>Supervisor:</u>	<u>Reason For Leaving:</u>	

If you need additional space, please continue on a separate sheet of paper.

## List professional, trade, business or civic activities and offices held.

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## ADDITIONAL INFORMATION

### Other Qualifications:

Summarize special job-related skills and qualifications acquired from employment or other experience.

### Specialized Skills: Check Skills/Equipment Operated

<input type="checkbox"/> Computer	<input type="checkbox"/> Calculator	Production/Mobile Machinery (Please List):	Other (Please List):
<input type="checkbox"/> Microsoft Word	<input type="checkbox"/> Copy Machine		
<input type="checkbox"/> Microsoft Access	<input type="checkbox"/> Typewriter		
<input type="checkbox"/> Microsoft Excel	<input type="checkbox"/> Fax		
<input type="checkbox"/> Microsoft Power Point	<input type="checkbox"/> PBX System		
<input type="checkbox"/> Other			

### State any additional information you feel may be helpful to us in considering your application:

#### Note to Applicants:

DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING:

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? (A description of the activities involved in such a job or occupation is available.) :

Yes

No

### References

1.	<u>Name:</u>	<u>Address:</u>
	<u>Telephone Number:</u>	<u>Notes:</u>
2.	<u>Name:</u>	<u>Address:</u>
	<u>Telephone Number:</u>	<u>Notes:</u>
3.	<u>Name:</u>	<u>Address:</u>
	<u>Telephone Number:</u>	<u>Notes:</u>

# STATEMENT OF AGREEMENT

# ATTACHMENT 1.1

Have you ever been "terminated" or "Violated a Drugfree Workplace Policy" from a previous employer?  Yes  No

If Yes, please explain:

**If you have been "terminated" or "violated the Drugfree Workplace Policy" while employed with Monroe County BOCC, you cannot reapply for another county position for six (6) months from your last date of employment.**

## ARRESTS, CONVICTIONS AND PLEAS

**Convictions will be reviewed on a case by case basis, taking into consideration (1) the nature of the offense, (2) time passed since the offense, and (3) how the offense relates to the job. You will not be automatically disqualified based on the conviction or plea.**

Have you ever been convicted or plead to a misdemeanor or felony whether adjudication was withheld or not?

If Yes, please explain:  Yes  No

Within the past seven (7) years have you been arrested for any other offense (including arrests in which the charges are still pending)?

Yes  No

If Yes, please explain:

If you have not lived in Florida for the past three (3) years it is necessary for you to obtain your past three years driving record from the previous state or states you have lived in.

I have lived in Florida for more than 3 years

I have not lived in Florida for more than 3 years

Please list all traffic offenses (felony and misdemeanor):

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

**STATEMENT OF AGREEMENT****ATTACHMENT 1.2**

Monroe County is an equal opportunity employer, and it is our policy to select the best matched individual for the job based upon job related qualifications, regardless of race, color, creed, sex, national origin, age, handicap or other protected groups under state, federal or local Equal Opportunity Laws.

**Please initial next to each statement below:** I understand and agree that:

	Any material misrepresentation or deliberate omission of fact in my application may be justification for refusals of, or if employed, termination from employment.
	It is my understanding that Monroe County may make a thorough investigation of my entire work history and may verify all data given in my application for employment, related papers or oral interviews. I authorize such investigation and the giving and receiving of any information requested by Monroe County and I release from liability any person giving or receiving any such information. I understand that falsification of data so given or other derogatory information discovered as a result of this investigation may prevent my being hired, or if hired, may subject me to immediate dismissal.
	I agree that my employment may be terminated by Monroe County at anytime without liability for wages or salary except such as may have been earned at the date of such termination. If requested by the management at any time, I agree to submit to a search of my person or of any locker that may be assigned to me, and I hereby waive all claims for damages on account of such examination. I authorize any physician or hospital to release any information which may be necessary to determine my ability to perform the duties of a job I am being considered for prior to employment or in the future during my employment with Monroe County. I consent to take a medical examination by a qualified physician at the discretion of my employer.
	Although management makes every effort to accommodate individual preferences, business needs may at times make the following conditions mandatory: overtime, shift work, a rotating work schedule or a work schedule other than originally assigned. I understand and accept these conditions on my continuing employment.
	I further understand that this is an application for employment and that no employment contract is being offered.
	I further understand that some full time employees work varying work hours, varying from 25 to 40 hours per week. I understand as a condition of my employment I will be working a 40-hour workweek unless indicated otherwise.
	I understand that if I am employed, such employment is for no definite period of time and that Monroe County can change wages, benefits, hours of work and working conditions at any time.
	I understand that all documents that are retained in the Human Resources Office are public record in accordance with Florida Statutes Chapter 119.
	It is understood that per Section 2.06A of the Monroe County Employment Policies and Procedures Manual, Monroe County has that right to perform post-offer or post-employment drug testing for reasonable suspicion.
	I understand that as a Monroe County employee, it will be my responsibility to provide disaster assistance during times of emergency in any capacity deemed appropriate.

**Employer, remove this page upon completion of the selection process**

YOUR NAME:	
POSITION TITLE FOR WHICH YOU ARE APPLYING:	

Completion of the Veterans Preference section is made on a voluntary basis and kept confidential in accordance with the Americans with Disabilities Act. Listed below are the seven Veterans Preference categories.

- 1. Disabled Veterans who have served on active duty in any branch of the Armed Forces and who presently have an existing service-connected disability which is compensable under public laws administered by the DVA or are receiving compensation, disability retirement benefits, or pension by reason of public laws administered by the DVA and the Department of Defence.
- 2. The Spouse of a Veteran:
  - a) Who has a total and permanent service-connected disability and who, because of this disability, cannot qualify for employment; or
  - b) Who is missing in action, captured by a hostile force, or detained or interned in line of duty by a foreign government or power.
- 3. A Veteran of any war, who has served at least one day during that war time as defined in subsection 1.01 (14); or who has been awarded a campaign or expeditionary medal who was discharged under honorable conditions. Active duty for training shall not be allowed for eligibility under this paragraph.
- 4. The unremarried widow or widower of a Veteran who dies of a service-connected disability.
- 5. The mother, father, legal guardian, or unremarried widow or widower of a service member who died as a result of a military service under combat related condition as verified by the U.S. Department of Defense.
- 6. A Veteran as defined in section 1.01m (14) Florida statutes. "Active Duty for training" may not be allowed under this paragraph. The term "veteran" is defined as a person who served in the active military, naval, or air service and who was discharged or released therefrom under honorable conditions only or who later received an upgraded discharge under honorable conditions.
- 7. A current member of any reserve component of the U.S. Armed Forces or the Florida National Guard.

**Eligible wartime periods are:**

- World War II: December 7, 1941 to December 31, 1946
- Korean Conflict: June 27, 1950 to January 31, 1955
- Vietnam Era: February 28, 1961 to May 7, 1975
- Persian Gulf War: August 2, 1990 to January 2, 1992
- Operation Enduring Freedom: October 7, 2001 to TBD
- Operation Iraqi Freedom: March 19, 2003 to TBD
- Operation New Dawn: September 1, 2010 to TBD

\* Documentation must be provided in order to establish eligibility for Veterans Preference. Documentation must be received no later than 11:59 p.m. on the posting closing date. For a complete listing of required documents for each category please visit: <http://floridavets.org/wp-content/uploads/2014/06/Veterans-Preference-Frequently-Asked-Questions.pdf> . Wartime periods are defined in F.S. 1.01. If a person claims Veterans Preference and is employed by a government entity, that person may claim a Veterans' preference when applying for non-exempt government positions in the future. Veterans preference shall not expire after a non-exempt, eligible person has been employed by the state or any agency of a political subdivision of the state. Under Florida law, preference in appointment shall be given by the state to those persons in categories 1 and 2 and then those in categories 3 and 4. Veterans Preference is only available to Florida residents. If an applicant claiming Veterans Preference for a vacant position is not selected, he/she may file a complaint with the Florida Department of Veterans Affairs, P.O. Box 31003, St. Petersburg, Florida 33731-8903. A complaint must be filed within 21 days of the applicant receiving notice of the hiring decision made by the employing agency or within 3 months of the date the application is filed with the employer if no notice is given.

Signature:	Date:
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POST OFFER EMPLOYMENT AGREEMENT

Please read carefully

I acknowledge that Monroe County has a "Drug-Free Workplace Policy and Work Rules" regarding substance abuse. I further acknowledge that I have been advised that drug and/or alcohol testing may be required for the position for which I am applying.

I hereby authorize and give full permission to have the County's contracted medical provider, their staff, and/or their associates send a specimen of my urine and/or blood to a laboratory for screening tests for the presence of drugs. I authorize these results, positive or negative, to be given to a Medical Review Officer selected by the County and to representatives of the County.

I understand that either my refusal to submit to the drug and/or alcohol test or my failure to qualify according to the minimum standards established by the County for this drug and/or alcohol test may disqualify me from further consideration for employment at this time.

I will hold the County and all concerned parties harmless and waive any legal rights for any alleged harm to me or for interfering with my ability to be hired as a result of the test reports, or my non submission to the tests. This includes possible clerical or laboratory error.

I understand that if my post-offer drug and/or alcohol test results are positive, I will not be permitted to apply for another position for six months from my date of termination with Monroe County.

I have read in full and understand the above statements and conditions of employment:

**Name (Please Print):**

**Signature of Applicant:**

**Date:**

# ATTESTATION

All Monroe County BOCC applicants and Newly Hired employees as of January 1, 2015 must complete this form before being considered or hired for employment.

1. I am of legal age, under no disabilities, and fully competent to sign this affidavit.
2. Please initial the statements below in agreement to understanding the requirements and penalties associated with tobacco use.

	I understand that Monroe County BOCC has a no tobacco use policy. Tobacco products are defined as cigarettes, cigars, pipe tobacco, chewing tobacco, snuff, dip, electronic or e-cigarettes that contain nicotine or any other product that contains tobacco or nicotine. Nicotine replacement products, such as gum and patches, are also considered tobacco products.
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	I hereby certify that I do not use tobacco products.
--	------------------------------------------------------

	I agree to remain tobacco free while employed with Monroe County BOCC.
--	------------------------------------------------------------------------

	I understand that I may be subject to testing during my employment with Monroe County BOCC to verify non-use of tobacco products. A refusal to test is considered a "positive" for tobacco use.
--	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

	I understand that if hired by Monroe County and if I enroll any dependents into the County's medical plan, I will be subject to a \$50 surcharge per month for myself and each dependent who uses tobacco products.
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<b>Name (Please Print):</b>	
<b>Signature of Applicant:</b>	<b>Date:</b>

I UNDERSTAND AND AGREE THAT: I must possess and retain a valid Florida Operator's or Commercial Driver's License (as appropriate) in order to operate a county motor vehicle or to drive a personal vehicle while in the performance of my duties with Monroe County.

I authorize the County to, at any time, obtain any State, County and/or local public driving records pertaining to me.

My right to drive a vehicle on County business will be denied or revoked at any time when I do not possess a valid State of Florida Operator's or Commercial Driver's License.

I must report any motor vehicle citation for violations received while operating my personal or County vehicle (other than parking violations) or suspensions of my license, within forty-eight (48) hours of receipt of same. Further, I understand failing to do so could result in revocation of my authorization to operate County or personal vehicle while in the performance of my duties with Monroe County.

All moving violations will be evaluated by the Monroe County Safety Officer on a case by case basis in accordance with Monroe County Safety Policies and Procedures to determine my eligibility to operate a County or personal vehicle in the performance of my duties with Monroe County. Violations that will demonstrate a disregard for Florida Uniform Traffic Laws and Monroe County Safety Policies may result in the suspension or revocation of my County Driving Permit.

Additionally, I understand that all driving related incidents involving property damage or personal injury (whether or not a citation was issued) are subject to review by the Safety Officer to determine my eligibility to operate a County or personal vehicle while in the performance of my duties with Monroe County.

I understand that denial or revocation of my County driving privileges may result in the termination of my employment.

**I Certify that the information below is valid at this time.**

Name as it appears on license

Address as it appears on license

City and Zip Code:

Current State of Florida License Number

License Class and Code

Signature

Date

APPLICANT NAME:	DATE:
POSITION APPLYING FOR:	

**IN HOUSE PROMOTIONAL OPPORTUNITY APPLICANT**

Only fill out below if you are NOT currently in a safety sensitive position. HAVE YOU HELD OR PREVIOUSLY APPLIED FOR A SAFETY SENSITIVE POSITION, AS DEFINED BELOW, WITHIN THE PAST 3 YEARS OTHER THAN MONROE COUNTY EMPLOYMENT?

 YES

 NO

**\*If YES AND APPLYING FOR SAFETY SENSITIVE POSITION, have employee sign authorization to release form**

**OUTSIDE APPLICANT**

HAVE YOU HELD OR PREVIOUSLY APPLIED FOR A SAFETY SENSITIVE POSITION, AS DEFINED BELOW, WITHIN THE PAST 3 YEARS?

 YES

 NO

**\*If YES AND APPLYING FOR SAFETY SENSITIVE POSITION, have employee sign authorization to release form**

**DEFINITION OF SAFETY SENSITIVE: A MOTOR VEHICLE OR COMBINATION OF MOTOR VEHICLES USED TO TRANSPORT PASSENGERS OR PROPERTY OF THE MOTOR VEHICLE: HAS A GROSS COMBINATION WEIGHT RATING OF 26,001 OR MORE POUNDS, INCLUSIVE OF A TOWED UNIT WITH A GROSS VEHICLE WEIGHT RATING OF MORE THAN 10,000 POUNDS; OR, HAS A GROSS VEHICLE WEIGHT RATING OF 26,001 OR MORE POUNDS; OR, IS DESIGNED TO TRANSPORT SIXTEEN (16) OR MORE PASSENGERS, INCLUDING THE DRIVER; OR, IS OF ANY SIZE AND IS USED IN THE TRANSPORTATION OF MATERIALS FOUND TO BE HAZARDOUS FOR THE PURPOSES OF THE HAZARDOUS MATERIALS TRANSPORTATION ACT AND WHICH REQUIRE THE MOTOR VEHICLE TO BE PLACARDED UNDER THE HAZARDOUS MATERIALS REGULATIONS (49 C.F.R. part 172, subpart F).**

**Employer, Remove This Page**

Please fill out the below information. This information will be utilized for the annual EEO-4 report that is required by State and Local Government Agencies and other governmental surveys. This information will be kept separate from your employment application and/or Human Resources file. Completion of this form is voluntary.

Please Check Below:

Employee

Applicant

Position Title For Which You Are Applying:

Date:

**MALE APPLICANTS:**

AA WHITE MALE, NON-HISPANIC

AB BLACK MALE, NON-HISPANIC

AC HISPANIC OR LATINO MALE

AD ASIAN MALE

AE NATIVE HAWAIIAN OR PACIFIC ISLANDER MALE

AF AMERICAN INDIAN OR ALASKA NATIVE MALE

AG TWO OR MORE RACES MALE

**FEMALE APPLICANTS:**

BA WHITE FEMALE, NON-HISPANIC

BB BLACK FEMALE, NON-HISPANIC

BC HISPANIC OR LATINO FEMALE

BD ASIAN FEMALE

BE NATIVE HAWAIIAN OR PACIFIC ISLANDER FEMALE

BF AMERICAN INDIAN OR ALASKA NATIVE FEMALE

BG TWO OR MORE RACES FEMALE

OTHER:

**Walk In Hours**

8:00 A.M. - 5:00 P.M.  
Monday through Friday  
CLOSED HOLIDAYS

**Office Numbers:**

Lower Keys 305-292-4557  
Middle Keys 305-289-2517  
Upper Keys 305-451-2396

Applications will remain on file for one (1) year from the date of submission, and it will be your responsibility to contact this office each time you wish to be considered for an available position. You may call us, stop by our office, or notify us in writing of your interest however, you must contact the Human Resource Office before the application deadline for each available position you are interested in applying.

**IT WILL BE THE APPLICANT'S RESPONSIBILITY TO CONTACT THE HUMAN RESOURCE DEPARTMENT TO INQUIRE AS TO THE STATUS OF THE POSITION(S) FOR WHICH THEY HAVE APPLIED. DUE TO LACK OF FUNDS, NOTIFICATION CANNOT BE GIVEN WHEN A POSITION HAS BEEN FILLED.**

Available positions are posted on designated bulletin boards throughout the County for a minimum of seven (7) calendar days, after which consideration is first given to County employees. If no In-House applicant is chosen, the position will then be offered to the general public for application.

A job description will be attached to each posted notice and minimum qualifications will be noted in advertisements. However, many positions require the ability to speak and/or write English, although this may not be indicated on every job description for which it is required.

Applications will be closed when a sufficient number of qualified applicants have applied, or when the deadline date indicated in the advertisement has been reached. Applicants must meet all minimum qualifications to be eligible for an interview. The interviewing department, in its discretion, may interview all, some, or none of the applicants meeting minimum qualifications.

**Please submit your application via e-mail or kiosk in your area. It is your responsibility to ensure that the application has been received by the Human Resources office before the deadline date. Other departments will not be responsible for providing your application to the human resources office for consideration.**

Our office staff is happy to assist you with this application process, and we are available during the hours mentioned above. Please do not hesitate to contact us.

ALL POSITIONS REQUIRING A DEGREE WILL REQUIRE A CERTIFIED COPY OF SUCH DEGREE  
(OR TRANSCRIPTS) SENT TO US DIRECTLY FROM THE SCHOOL.

Monroe County wants to assist you in your search for employment. Should you not be hired for the job which you are applying, you may be eligible for immediate employment through the following agency:

**CareerSource  
South Florida**

1111 12th Street, Ste. 311  
Key West, FL. 33040  
305-292-6762  
8:00 a.m. - 5:00 p.m.  
Monday - Friday

**CareerSource  
South Florida**

103400 O/S Hwy., Suite 239  
Key Largo, FL. 33037  
305-853-3540  
8:00 a.m. - 5:00 p.m.  
Monday - Friday

**MONROE COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER**

A copy of the Affirmative Action Plan is available in our office, 1100 Simonton Street, Key West Fl. 33040 or contact our EEO Officer at (305) 292-4545

Any applicant who is seeking employment in a position that comes under the regulations enacted by the United States Department of Transportation, Federal Highway Administration, 49 C.F.R. part 382 (DOT Regulations), pertaining to operators of commercial motor vehicles will be drug tested before beginning employment. In addition, the county must conduct a pre-employment inquiry from the applicant's prior employers concerning the applicant's history of drug and alcohol testing under DOT Regulations. Thus, such applicants must sign a waiver and release of information that will be sent to all employers at which the applicant worked during the two-year period before his or her application for employment with the County.

The County will eliminate from further consideration for employment (or will terminate if already working) any applicant who refuses to submit to the post-offer drug test, who fails to pass the drug test, who refuses to cooperate with the County's pre-employment inquiry, and/or who's pre-employment inquiry reveals a current violation of DOT Regulations. Applicants have rights regarding the investigative information that is provided. Applicants have the right to review information provided by previous employers; the right to have errors in the information corrected by the previous employer and for that previous employer to re-send the corrected information to the prospective employer; and, the right to have rebuttal statement attached to the alleged erroneous information, if the previous employer and the driver cannot agree on the accuracy of the information.

Applicants who are hired to work in positions that come under the DOT Regulations remain subject to the drug and alcohol testing requirements (including random testing), and the other requirements of the DOT Regulations.

A summary of Monroe County's Drug And Alcohol testing Policy for Employees and Drivers Subject to United States Department of Transportation Regulations, and additional information about the Policy, are available to applicants and employees from the following Human Resources Representatives at the County Human Resources Offices listed below:

<u>Key West:</u>	<u>Marathon:</u>	<u>Key Largo:</u>
Monroe County Human Resources 1100 Simonton Street 2nd Floor Key West, FL 33040 (305) 292-4557	Debbie Lofberg, Liaison Growth Management Division Marathon Regional Service Center 2798 Overseas Hwy., MM 47.5 (gulf) Marathon, FL 33050 (305) 289-2517	Caridad Reyes Key Largo Library 101485 O/S Hwy., MM 101.485 (ocean) Key Largo, FL 33037 (305) 451-2396



# MONROE COUNTY BENEFITS AT A GLANCE

# Attachment 11

BENEFIT	REQUIREMENT(S)	EXPLANATION	MORE INFO..
<b>RETIREMENT: PENSION PLAN:</b> <b>AS OF July 1, 2018:</b> <b>Regular Class:</b> county contribution 8.26% - employee contribution 3% <b>TOTAL 11.26%</b> <b>Special Risk Class:</b> county contribution 24.50% - employee contribution - 3% <b>TOTAL - 27.50%</b>	<b>Regular employee:</b> (hired before 07/01/11) normal retirement age is 62 and be vested (hired after 07/01/11) normal retirement age is 65 and be vested. <b>Special Risk employee:</b> (hired before 07/01/11) normal retirement age is 55 and be vested (hired after 07/01/11) normal retirement age is 60 and be vested.	Hired before July 1, 2011 vested after 6 years of credible service.  Hired on or after July 1, 2011 vested after 8 years of credible service.	1-866-377-2121 <a href="http://www.myfrs.com">www.myfrs.com</a>
<b>RETIREMENT: INVESTMENT PLAN:</b> <b>AS OF July 1, 2018:</b> <b>Regular Class:</b> county contribution 8.26% - employee contribution 3% <b>TOTAL - 11.26%</b> <b>Special Risk Class:</b> county contribution 24.50% - employee contribution - 3% <b>TOTAL - 27.50%</b>	Since plans and rates of contributions vary, Investment Plan members should contact the Investment Plan Administrator directly.	Vested after 1 year in the Plan. Defined contribution based on salary. Employee allocates the contributions among various investment funds. Benefit depends on investment gains/losses.	1-866-446-9377 or visit the "Investment Funds" page of: <a href="http://www.myfrs.com">www.myfrs.com</a>
<b>DROP</b>  Employer contribution is 14.03%.	<b>Regular Class, etc. employee:</b> age 62 and 30 yrs of service. Must be fully vested and enrolled in FRS before July 1, 2011. <b>Special Risk employee:</b> age 55 and 25 yrs of service. Must be fully vested and enrolled in FRS before July 1, 2011..	Program that allows employee to retire without terminating employment for up to 5 years.	1-888-738-2252 <a href="http://www.myfrs.com">www.myfrs.com</a>
GROUP HEALTH	Effective after 60 days of employment; must be regular, 25+ hpw employee.	Includes major medical, pharmaceutical, EAP (see below), \$20,000 Life Insurance Policy also available supplemental Life. Dental & Vision Coverage are optional. \$25.00 per month credit toward employee cost of Traditional Health Plan or \$ 25.00 per month deposit into HSA on High Deductible Health Plan with completion of wellness program requirements.	Benefit Plan Handbook Revised 01/01/18
SECTION 125	25+ hpw employee. Eligible for deductions pertaining to insurance coverage.	Allows payroll deduction for insurance coverage to be taken from your paycheck before taxes are computed	Group Insurance Office
ANNUAL LEAVE	Salary, regular employee, 20+ hpw employee-prorated.	13 days per yr (increased with years of service), max carryover 40 days.	PPP Section 7.01
ANNUAL LEAVE MAXMIUM	Excess of 40 working days of leave.	On 4/1 of each FY: Time earned in excess will be lost.	PPP Section 7.01C (1)
SICK LEAVE	Salary, regular employee, 20+ hpw employee-prorated.	13 days per year; must wait 90 days before use.	PPP Section 7.02
SICK LEAVE PAYOUT	Employed for five yrs or more.	S/L paid according to years of service upon separation.	PPP Section 7.07
SICK LEAVE POOL	Eligible after 1 year; 25+ hpw employee.	640 hrs lifetime maximum.	Admin Inst 4702. & PPP Sec 7.02D
FAMILY MEDICAL LEAVE ACT	Eligible after 1 year; must have wkcd 1,250 hrs immediately preceding leave.	Up to 12 weeks protected leave; paid employee health benefits for leave without pay.	PPP Section 8.05
EMPLOYEE ASSISTANCE PROGRAM	None.	Provides confidential, short term, no cost professional assistance to help employees and their families resolve problems that adversely affect their personal lives and job performance	1-877-747-1200 <a href="http://WWW.accessQHS.com">WWW.accessQHS.com</a>
IN-HOUSE PROMOTION	Must work 6 months in current position.	Eligible first 7 days of opening.	PPP Section 2.13
CAREER SERVICE	Satisfactory completion of 1 yr prob period;	Wrongly suspended without pay, discharged, receive reduction in pay or demotion: right to appeal to Board.	PPP Section 1.01
FLEX TIME/ALTERNATIVE WORK SCHEDULE	Alternative Work Schedule: Division Director discretion. FlexTime: Department Head Approval	Allows longer work days, shorter workweeks and flexible work hours for the department's and/or employee's benefit.	PPP 5.01 H & I
EMPLOYEE QUARTER/YEAR	Must have held current position 1 year.	Plaque and \$300 lump sum payment; \$3000 lump sum Employee of the Year.	Admin Inst 4902. & PPP Sect 2.15A
YEARS OF SERVICE AWARD	Eligible after 5 yrs of career service employment	Pin, monetary award.	PPP Section 2.15B
CERTIFICATION INCENTIVE PROGRAM	Certification program must meet certain criteria according to position requirements. Must have prior approval.	Awards \$1500.00 salary increase to employee upon completion of certification program.	Growth Mgt. Admin Inst. 4006.3 PPP 4.08
EMPLOYEE SUGGESTION PROGRAM	None	Recognition and a monetary award not to exceed \$2500	Admin Inst 4010 & PPP 2.15C
HOLIDAYS	Salary employee.	12 days per year.	PPP Section 6.01
BEREAVEMENT LEAVE	None.	2 days; immediate family member.	PPP Section 7.05
PAYROLL DEDUCTION	None.	Keys Federal and Southernmost Credit Union; Savings, checking, Xmas Club, etc.	Contact HR Rep
DIRECT DEPOSIT	None.	Savings or Checking Account; Bank of choice	Contact HR
DEFERRED COMPENSATION	None.	Tax Deferred Savings; invest stocks/mutual funds.	Contact <a href="mailto:cesar.caram@valic.com">cesar.caram@valic.com</a> or <a href="mailto:kevin.guesaeda@valic.com">kevin.guesaeda@valic.com</a>
DOMESTIC PARTNER	Must meet specific criteria.	Defined significant other – eligible for same benefits equal to spouse.	PPP Section 14.02
EDUCATIONAL ASSISTANCE	Eligible after 1 year; Full time employees	Full paid tuition, lab fees, on line access fees & distance learning fees; must be job related; portion of textbooks paid	PPP Section 2.11
THEME PARK DISCOUNTS	None.	Kennedy Space Center, Universal Studios, Hotel discounts.	Contact HR
PARTICIPATION IN COMMUNITY ORGANIZED EVENTS	Covered under the County's Health Insurance Plan	Reimbursement of fees, not to exceed \$100 per year maximum, for participation and completion of activities which shall include triathlons, run/walkathons and bikeathons.	Resolution # 049-2017
MENTORING & TUTORING	Training as designated by School Board Representative.	1 hour per week Admin Leave to mentor a qualified youth. Resolution # 100-2000. Approved BOCC 3/15/00.	PPP 8.01 J Contact School
AMERICAN FAMILY LIFE ASSURANCE COMPANY OF COLUMBUS (AFLAC)	NONE	Supplemental Insurance thru payroll deduction	1-800-992-3522 <a href="http://www.aflac.com">www.aflac.com</a>
ASSOCIATION MEMBERSHIPS AND PARTICIPATION	NONE	Permitted time off from work with pay to be a speaker at a function to attend organization membership meetings and participant in officer roles.	PPP Section 2.10

\*This document is not designed to contain or be interpreted as a comprehensive inventory of all benefits and explanation of those benefits. Please review Monroe County Human Resources Policies and Procedures for information regarding the above mentioned benefits. *Employee Services Rev. 07/2018*

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