

**“NOTICE - DRUG FREE WORKPLACE -**

**IF YOU USE ILLEGAL DRUGS, DO NOT APPLY. WE TEST ALL  
APPLICANTS FOR DRUGS PRIOR TO HIRE.”**

Please initial and date, then return with application. Thank you.

\_\_\_\_\_  
Initial

\_\_\_\_\_  
Date

BCC APPROVED POLICY RESOLUTION 05/19/94

**NOTICE TO APPLICANTS**

**ADVANCED REQUEST FOR REASONABLE ACCOMMODATION**

We encourage qualified individuals with disabilities to apply for employment. Individuals with disabilities who require reasonable accommodation to participate in any portion of the application, inter, and/or testing process must advise us in advance. Upon request, applicants must provide documentation confirming a disability and the need for accommodation

Please initial and date, then return with application. Thank you.

\_\_\_\_\_  
Initial

\_\_\_\_\_  
Date

**VETERANS' PREFERENCE INFORMATION SHEET**  
**Complete ONLY if you are a Florida resident claiming Veterans' Preference**

The Board of County Commissioners, in accordance with Florida Law, provides preference to veterans in appointment and retention. The term "veteran" means 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, notwithstanding any action by the United States Department of Veterans' Affairs on individuals discharged or released with other than honorable discharges. To receive benefits as a wartime veteran, a veteran must have served in a campaign or expedition for which a campaign badge has been authorized or a veteran must have served during one of the following periods of wartime service. The veteran must have served at least 1 day during a wartime period to be eligible for veterans' preference. Active duty for training shall not be allowed for eligibility under this paragraph.

**Check the appropriate statement as it applies to you:**

- \_\_\_\_ 1. A veteran with a service-connected disability who is eligible for or receiving compensation, disability retirement benefits, or pension by reason of public laws administered by the U.S. Department of Veterans' Affairs and the Department of Defense, or
- \_\_\_\_ 2. The spouse of a veteran who cannot qualify for employment because of a total, permanent disability, resulting from a service connected disability, or the spouse of a veteran missing in action, captured in line of duty by a hostile force, or forcibly detained or interned in line of duty by a foreign government or power, or
- \_\_\_\_ 3. A veteran of any war as defined in s.1.01 (14). A Veteran of any war who served on active duty during a wartime era; and who was discharged under honorable conditions:  
    **"Wartime Era"** includes:
- (a.) **World War II:** December 7, 1941 to December 31, 1946;
  - (b.) **Korean Conflict:** June 27, 1950 to January 31, 1955;
  - (c.) **Vietnam Era:** February 28, 1961, to May 7, 1975;
  - (d.) **Persian Gulf War:** August 2, 1990, to January 2, 1992
  - (e.) **\*Operation Enduring Freedom:** October 7, 2001 to date to be determined;
  - (f.) **\*Operation Iraqi Freedom:** March 19, 2003, to date to be determined, or
- \*The receipt of a campaign or expeditionary medal is not required for these dates of service.**
- \_\_\_\_ 4. The un-remarried widow or widower of a veteran who died of a service connected disability.

**To be eligible for preference, appropriate supporting documentation (DD214 or statement of disability certification) must be submitted at time of application.**

Under Florida law, preference in appointment and retention shall be given first to those people included in 1 and 2 above and second to those persons included in 3 and 4 above.

An applicant claiming Veterans' Preference for a vacant position who was not selected may file a complaint with the Florida Department of Veterans' Affairs, PO Box 31003, St. Petersburg, Florida 33731, within 21 calendar days from the date of notice that the applicant was not selected for the position or within 3 months of the date the application was filed with the employer if no notice is given.

BRANCH OF SERVICE: \_\_\_\_\_

DATE OF ENTRY: \_\_\_\_\_

DATE OF DISCHARGE: \_\_\_\_\_

SIGNATURE \_\_\_\_\_

