

APPLICATION FOR EMPLOYMENT WITH THE CITY OF EDGEWATER

The City of Edgewater is an Equal Opportunity Employer and will not discriminate against any person because of race, color, religion, creed, gender, age, national origin, disability, Veteran or marital status, or other legally protected status.

PLEASE PRINT

Position(s) Applied for:

Police Officer

Date of Application

06/15/2020

How did you learn about us? (Please circle one)

☐

City Web Site

☐

Friend

☐

Walk-In

☐

Employment Agency

☐

Relative

☒

Other Ofc Hupert

Last Name

Checksfield

First Name

Stephen

Middle Name

Francis

Address

Number

Street

City

State

Zip Code

Privacy Information - F.S. 119.071(4)(d)(2a)

Telephone Number

Privacy Information - F.S.
119.071(4)(d)(2a)

Have you ever filed an application with us before? ____ Yes ☒ No If yes, give date ____

Have you ever been employed with us before? ____ Yes ☒ No If yes, give date ____

Do any of your relatives work here? ____ Yes ☒ No If yes, list name and
your relationship ____

May we contact your present employer? ☒ Yes ____ No

On what date would you be available for work? Police Officer

Are you available to work: Full Time Part Time Shift Work Temporary

Are you currently on "lay-off" status and subject to recall? ____ Yes ☒ No

Can you travel if a job requires it? ☒ Yes ____ No

Are you a United States citizen ☒ Yes ____ No

If not, do you possess an Alien Registration Card? ____ Yes ☒ No

If yes, give Alien Registration # ____

Have you been convicted of a felony? Yes ☒ No

Conviction will not necessarily disqualify an applicant from employment.

If yes, please explain ____

EDUCATION/ SPECIALIZED TRAINING

Name and Address of School	Years Completed	Diploma Degree
Elementary School		
High School	Shoemaker High School, Killeen Texas	
Graduate Professional		
Other (Specify)	Police Academy at Daytona State Collage	

Describe any specialized education, training, apprenticeship, and/or skills.

LE Academy, IBTM-Traffic Homicide Investigation, Radar, CIT Training and Autism awareness training.

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

You may exclude membership, which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.

Other Qualifications

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

showcase duties like apprehending suspects, enforcing the law, cruising assigned areas, looking for suspicious activities,

providing first aid to victims, investigating crime scenes, and interviewing witnesses.

Check Skills/Equipment Operated

☒ Copier	☒ Fax	☐ Typewriter
☒ Calculator	☐ Multi-line Telephone	☐ CRT
☒ PC/ Software applications (list): Word, Excel		Other (list):
Copperfire		

Driver's License # C214-786-83-262-0

Expiration Date: 07-22-2026

CDL/ Type: E Operators

MILITARY SERVICE RECORD

It is City policy to give preference to eligible veterans and spouses of veterans in accordance with Chapter 295, Florida Statutes.

Were you in the U.S. Armed Forces? ☒ Yes ☐ No If yes, list any job related training

Fire Rescue Officer

Are you claiming Veteran's Preference as a:

☐ Disabled veteran
☐ Spouse of totally disabled veteran or who is MIA
☐ Veteran of any war
☐ Unremarried widow or widower of a veteran who died of a service-connected disability

Have you claimed Veteran's Preference since October 1, 1987? ☐ Yes ☒ No

The applicant claiming preference is responsible for providing the required documentation when submitting their application.

EMPLOYMENT EXPERIENCE

START WITH YOUR PRESENT OR LAST JOB.

Employer	Dates Employed From To	Work Performed
City OF New Smyrna Beach	08-07-2017	Police Officer
Address 210 Sams Ave, New Smyrna Beach Florida 32137		
Employer	Dates Employed From To	Work Performed
Army Airforce Exchange	2015-2017	Supervisor
Address Bldg 103 - Lilienthalallee 100, NATO Base Geilenkirchen, AE 52511		
Employer	Dates Employed From To	Work Performed
ITT Excelis (Afghanistan)	2011 - 2012	Contract Firefighter
Address 400 Initiative Dr. Rochester, New York 14624, US		
Employer	Dates Employed From To	Work Performed
Wackenhut LLC.	2007-2011	Contract Firefighter
Address 1665 North Ft. Myer Ste. 1100, Arlington, VA 22209		

REFERENCES

1. Robert Dowling	(254) 3689059
Name	Phone
2202 Mike Dr, Copperas Cove, Texas 76542	
Address	
2. Kris Beatty	Privacy Information -
Name	Phone
Privacy Information - F.S. 119.071(4)(d)(2a)	
Address	

APPLICANT'S CERTIFICATION AND AGREEMENT

I understand that any false answers or statements made by me on this application or any supplement thereto, or any false statement made to any representative of the City of Edgewater during the interview process, will be sufficient grounds for immediate discharge, no matter when discovered.

I understand and agree that if I am hired by the City of Edgewater, my employment is for no definite period and may be terminated at any time without previous notice or cause. I understand that no supervisor or other representative of the City of Edgewater has the authority to enter into any agreement for employment for any specified period of time, except by written authorization by the City Manager.

I understand and agree that the City of Edgewater will make a thorough investigation of my character, reputation and past employment. I authorize the giving and receiving of any such information requested by the City of Edgewater and hereby release all former employers and their agents of any liability for any information they may give to the City of Edgewater. I hereby waive any rights or claims I may have, whether presently fully developed or not, against the City of Edgewater or its agents or employees arising out of, or resulting from the release, authorized or unauthorized, of the information received pursuant to or in connection with the City of Edgewater's handling, processing, or investigation of my application with the City of Edgewater.

I agree to a physical examination if requested, including testing for the use of illegal drugs, controlled substances or alcohol, prior to hiring, and at any time during my employment based upon reasonable suspicion and/or Federal and State regulations.

I hereby acknowledge that my employment with the City of Edgewater will begin with a designated probationary period.

Applicant's Signature

06-15-2020

Date