

# **CARMEN LUBBECKE P.A.**

## **EMPLOYMENT APPLICATION**

### **EQUAL OPPORTUNITY EMPLOYER**

#### **MAILING ADDRESS:**

**4411 BEE RIDGE RD #223**

**SARASOTA, FL 34233**

**941-685-8692**

**941-927-6959 FAX**

### **APPLICATION INSTRUCTIONS: (Read carefully before completing your application.)**

- All information you submit is subject to verification.
- You may attach a resume to the application, but the application must be completed in its entirety including salary information and reasons for leaving. "See resume" is not an appropriate response for any section of the application.
- Application must be signed and dated.
- If additional positions become open in the future for which you would like to be considered, you must submit a new employment application to apply. In lieu of completing a new form, if an application has been submitted within the past 60 days, you may contact the Human Resources Department to apply for the new/additional positions.
- Print in ink or type all information.
- Please complete all items that apply to you.
- Applications may be mailed or faxed to:
  - Carmen Lubbecke
  - 4411 Bee Ridge Rd. #223
  - Sarasota, FL 34233
  - Fax: 941-927-6959
  - E-Mail: clubbecke@verizon.net
- Notify the Human Resources Department in advance if you require special disability accommodations to participate in the employment process.

**CARMEN LUBBECKE, P.A. EMPLOYS ONLY U.S. CITIZENS AND LAWFULLY  
AUTHORIZED ALIENS WHO CAN PROVIDE EVIDENCE OF THEIR IDENTITY AND  
EMPLOYMENT ELIGIBILITY AS REQUIRED BY FEDERAL LAW.  
CARMEN LUBBECKE, P.A. IS AN AT-WILL EMPLOYER**

## **EMPLOYMENT APPLICATION**

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ MI: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Street City State Zip Code

HOME PHONE:( ) BUSINESS PHONE:( ) OTHER:( )

E-MAIL ADDRESS: \_\_\_\_\_ SOCIAL SECURITY NUMBER: \_\_\_\_\_

DATE AVAILABLE FOR WORK: \_\_\_\_\_ MINIMUM SALARY ACCEPTABLE: \_\_\_\_\_

**I am interested in:**  Full-Time  Part-Time

**Position Applied For:** \_\_\_\_\_ **How did you hear about this position?** \_\_\_\_\_

### **POSSIBLE CONFLICT INFORMATION**

ARE YOU AWARE OF ANY CASES WHICH YOU PERSONALLY WORKED ON OR THAT OTHER ATTORNEYS AT YOUR FORMER FIRM WORKED ON THAT WERE ALSO HANDLED BY ATTORNEYS AT CARMEN LUBBECKE, P.A.?  YES  NO

ARE YOU OR ANY OF YOUR RELATIVES EMPLOYED WITH A LAW FIRM WHICH MAY REPRESENT A CLIENT IN A CLAIM OR CASE WHICH IS ALSO BEING HANDLED BY ATTORNEYS AT CARMEN LUBBECKE, P.A.?  YES  NO

IF YOU ANSWERED YES TO EITHER OF THE ABOVE QUESTIONS, PLEASE PROVIDE RELEVANT INFORMATION (I.E., LAW FIRM NAME, CASE NAME, DATE, ATTORNEY NAME, ETC.) SO THAT POSSIBLE CONFLICTS OF INTEREST CAN BE ADDRESSED AND RESOLVED: \_\_\_\_\_

### **BACKGROUND INFORMATION: (Verification of the following information will be carried out through a law enforcement/background screening check.)**

HAVE YOU EVER BEEN CONVICTED OF A CRIME?  YES  NO

If "YES", what charges? \_\_\_\_\_  
Where Convicted (State/County): \_\_\_\_\_ Date of Conviction: \_\_\_\_\_

HAVE YOU EVER PLED NOLO CONTENDERE OR PLED GUILTY TO A CRIME?  YES  NO

If "YES", what charges? \_\_\_\_\_  
Where Convicted (State/County): \_\_\_\_\_ Date of Conviction: \_\_\_\_\_

HAVE YOU EVER HAD ADJUDICATION OF GUILT WITHHELD FOR A CRIME?  YES  NO

If "YES", what charges? \_\_\_\_\_  
Where Convicted (State/County): \_\_\_\_\_ Date of Conviction: \_\_\_\_\_

**Note:** A "YES" answer to these questions will not automatically bar you from employment. The nature, job-relatedness, severity and date of the offense in relation to the position for which you are applying are considered.

### **CITIZENSHIP**

ARE YOU A U.S. CITIZEN OR ARE YOU LEGALLY AUTHORIZED TO WORK IN THE U.S.?  YES  NO

CARMEN LUBBECKE P.A. hires only U.S. citizens and lawfully authorized alien workers. If a conditional offer of employment is made, you will be required to provide identification and proof of citizenship or authorization to work in the U.S.



**EMPLOYMENT (Continued):**

3. NAME OF PRESENT OR PAST EMPLOYER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: (\_\_\_\_) \_\_\_\_\_

JOB TITLE: \_\_\_\_\_ SUPERVISOR'S NAME: \_\_\_\_\_

FROM: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ TO \_\_\_\_ / \_\_\_\_ / \_\_\_\_ HOURS PER WEEK: \_\_\_\_\_ SALARY: \_\_\_\_\_  Hourly  
 Annually

DUTIES AND RESPONSIBILITIES: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

4. NAME OF PRESENT OR PAST EMPLOYER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: (\_\_\_\_) \_\_\_\_\_

JOB TITLE: \_\_\_\_\_ SUPERVISOR'S NAME: \_\_\_\_\_

FROM: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ TO \_\_\_\_ / \_\_\_\_ / \_\_\_\_ HOURS PER WEEK: \_\_\_\_\_ SALARY: \_\_\_\_\_  Hourly  
 Annually

DUTIES AND RESPONSIBILITIES: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

**KNOWLEDGE/SKILLS/ABILITIES (KSAs)**

List KSAs you possess which are relevant to the application.

\_\_\_\_\_

\_\_\_\_\_

**EMPLOYMENT AT WILL**

All employees of CARMEN LUBBECKE, P.A. are employed at will and as such are free to resign at any time without reason. CARMEN LUBBECKE, P.A. likewise, retains the right to terminate an employee's employment at any time with or without reason or notice subject to Federal and State statutory limitations taking precedence over same.

## APPLICANT CERTIFICATION

I hereby certify that all statements made on this application are true. I am aware that any **omissions, falsifications, misstatements, or misrepresentations above** may disqualify me for employment consideration and, if I am hired, may be grounds for termination at a later date.

I understand that CARMEN LUBBECKE, P.A. will conduct a background/screening check in accordance with Firm policy to verify any information I have provided in connection with my employment or to determine my suitability for employment. I understand that a falsification on this application regarding a criminal record will be grounds for rejection or termination if employed.

I expressly authorize, without reservation, CARMEN LUBBECKE, P.A., its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding CARMEN LUBBECKE, P.A. its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand and authorize CARMEN LUBBECKE, P.A. to review any and all information that is available regarding me on the worldwide web or within other electronic means and use such information to make a hiring decision.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of CARMEN LUBBECKE, P.A. is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the Firm's president.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE EMPLOYMENT AT WILL AND APPLICATION CERTIFICATION.**

I **CERTIFY** that to the best of my knowledge and belief all of the statements contained herein and on any attachments are **true, correct, complete, and made in good faith**. I further **CERTIFY** that I have read, fully understand and accept all terms of the foregoing Employment At Will and Applicant Certification.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

7/20/2009