Ryan L. Butler
Clerk of Circuit Court & Comptroller
P.O. Box 1028
Vero Beach, FL 32961-1028
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Information for Applicants

We appreciate your interest in employment opportunities in the office of the Indian River County Clerk of Circuit Court and Comptroller. It is important that you understand the application and interview process. Please read all of the information below before submitting an application.

Applications
Please submit only ONE (1) application for ALL vacant positions for which you are applying. Please do not submit the "Information for Applicants" page when submitting and application.

Applications are accepted only when a vacant position is listed on the Clerk's website. Applications received when no position is listed will be considered unsolicited and will not be accepted.

Applications may be:

- Faxed to: (772) 778-4748
- Mailed to: Indian River County Clerk of the Circuit Court
  Attn: Human Resources
  2000 16th Avenue
  Vero Beach, FL 32960
- Emailed to: Employment@indianriverclerk.com

It is important that the application be filled out completely. Even though you submit a resume, your application must be fully completed. If a question does not apply, mark N/A. Your application will NOT be considered if all questions are not answered.

If you are claiming Veteran's preference, required documentation (Form DD-214) must be submitted only if an offer of employment is made.

Reasonable accommodations will be made during the employment process for qualified applicants with disabilities when the Clerk's office is made aware of the need for such accommodations.

Interviews
Due to the number of applications we receive, we are only able to interview those applicants whose qualifications most closely match the requirements of the position we are filling.

If you are selected for an interview, you will be contacted by Human Resources to schedule an interview time. During the interview we will discuss your qualifications and provide you with information about the position. You may also be contacted to schedule additional interviews.

Selection decision
At each step in the process, a candidate's qualifications and references are carefully reviewed. We will select the candidate whose background and experience best meet our needs. Do not assume an offer of employment unless you have received one from Human Resources.

Indian River County Clerk of Court and Comptroller

Application for Employment

GENERAL INSTRUCTIONS

- Complete all information within this application in its entirety.
- Type or print in ink.
- All information provided will be a public record and will be released upon request, unless exempt or confidential
- Sign your name in the Certification Section (page 4). All information you submit is subject to verification.

POSITION APPLIED FOR

Application Date: _____ Date Available: _____

Position Title: _____

Position Number: _____

Minimum Acceptable Salary: _____

APPLICANT INFORMATION

Name _____

Mailing Address _____

E-mail Address _____

Phone _____

Have you ever been employed here before? ☐ Yes Dates - From: _____ To: _____ ☐ No

Type of employment desired ☐ Full Time ☐ Part Time

Referral name (if applicable) _____

EDUCATION

HIGH SCHOOL:

NAME / LOCATION OF SCHOOL

RECEIVED: ☐ Diploma ☐ Other (specify) _____ ☐ None

YOUR NAME, IF DIFFERENT WHILE ATTENDING SCHOOL: _____

COLLEGE, UNIVERSITY OR PROFESSIONAL SCHOOL: (TRANSCRIPTS MAY BE REQUIRED)

NAME OF SCHOOL	LOCATION	DATES OF ATTENDANCE (MONTH / YEAR)		CREDIT HOURS EARNED		MAJOR / MINOR COURSE OF STUDY	TYPE OF DEGREE EARNED
		FROM	TO	QTR	SEM		

YOUR NAME, IF DIFFERENT WHILE ATTENDING SCHOOL: _____

JOB-RELATED TRAINING OR COURSE WORK: (VOCATIONAL, TRADE, GOVERNMENTAL, BUSINESS, ARMED FORCES, ETC.)

NAME OF SCHOOL	LOCATION	DATES OF ATTENDANCE (MONTH / YEAR)		CREDIT HOURS EARNED		COURSE OF STUDY	TRAINING COMPLETED	
		FROM	TO	CLASS	CLOCK		YES	NO

YOUR NAME, IF DIFFERENT WHILE ATTENDING SCHOOL: _____

LICENSURE, REGISTRATION, CERTIFICATION (EXAMPLES: Teacher Certification, RN, LPN, PE, CPA, etc.)

LICENSE, REGISTRATION OR CERTIFICATION:	Number	Date Received	Expiration Date	Licensing Agency

Rev. 4/2025

PERIODS OF EMPLOYMENT

Describe all work experience in detail, beginning with your current or most recent job. Include military service (indicate rank), internships, and job-related volunteer work. If applicable, indicate number of employees supervised. Use a separate block to describe each position or gap in employment. If needed, attach additional sheets, using the same format as on the application. Resumes may be attached to provide additional information, but not as a substitute for the information requested.

1 Name of Present or Last Employer: _____

Address: _____ Your Job Title: _____

Supervisor's Name: _____ Phone No.: _____

FROM: _____ TO: _____ HOURS PER WEEK: _____

Duties and Responsibilities:

Reason For Leaving: _____

Your name if different during employment: _____

2 Name of Next Previous Employer: _____

Address: _____ Your Job Title: _____

Supervisor's Name: _____ Phone No.: _____

FROM: _____ TO: _____ HOURS PER WEEK: _____

Duties and Responsibilities:

Reason For Leaving: _____

Your name if different during employment: _____

3 Name of Next Previous Employer: _____

Address: _____ Your Job Title: _____

Supervisor's Name: _____ Phone No.: _____

FROM: _____ TO: _____ HOURS PER WEEK: _____

Duties and Responsibilities:

Reason For Leaving: _____

Your name if different during employment: _____

4 Name of Next Previous Employer: _____

Address: _____ Your Job Title: _____

Supervisor's Name: _____ Phone No.: _____

FROM: _____ TO: _____ HOURS PER WEEK: _____

Duties and Responsibilities:

Reason For Leaving: _____

Your name if different during employment: _____

5 Name of Next Previous Employer: _____

Address: _____ Your Job Title: _____

Supervisor's Name: _____ Phone No.: _____

FROM: _____ TO: _____ HOURS PER WEEK: _____

Duties and Responsibilities:

Reason For Leaving: _____

Your name if different during employment: _____

KNOWLEDGE / SKILLS / ABILITIES (KSAs)

List KSAs you possess and believe relevant to the position you seek, such as operating heavy equipment, computer skills, fluency in language(s), etc.

EXEMPTION FROM PUBLIC RECORDS DISCLOSURE

ARE YOU A CURRENT OR FORMER LAW ENFORCEMENT OFFICER, OTHER COVERED EMPLOYEE**, OR THE SPOUSE OR CHILD OF ONE, WHOSE INFORMATION IS EXEMPT FROM PUBLIC RECORDS DISCLOSURE UNDER SECTION 119.071(4)(d), FLORIDA STATUTES (F.S.)? ☐ YES ☐ NO

If yes, category:_____

**Other covered jobs include but are not limited to: correctional and correctional probation officers, firefighters, certain judges, assistant state attorneys, state attorneys, assistant and statewide prosecutors, personnel of the Department of Revenue or local governments whose responsibilities include revenue collection and enforcement or child support enforcement, and certain investigators in the Department of Children and Families [see§ 119.071.F.S.].

BACKGROUND INFORMATION

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR A FIRST DEGREE MISDEMEANOR? ☐ YES ☐ NO

If "YES", what charges? _____

Where convicted? _____ Date of Conviction: _____

HAVE YOU EVER PLED NOLO CONTENDERE OR PLED GUILTY TO A CRIME WHICH IS A FELONY OR A FIRST DEGREE MISDEMEANOR? ☐ YES ☐ NO

If "YES", what charges?_____

Where? _____ Date: _____

HAVE YOU EVER HAD THE ADJUDICATION OF GUILT WITHHELD FOR A CRIME WHICH IS A FELONY OR A FIRST DEGREE MISDEMEANOR? ☐ YES ☐ NO

If "YES", what charges? _____

Where? _____ Date: _____

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 [see §112.011, F.S.]

CITIZENSHIP

The state of Florida hires only U.S. citizens and lawfully authorized alien workers. You will be required to provide identification and either proof of citizenship or proof of authorization to work in the U.S.

1. ARE YOU A U.S. CITIZEN? ☐ YES ☐ NO
2. IF NO, ARE YOU LEGALLY AUTHORIZED TO ACCEPT EMPLOYMENT WITH THE SPECIFIC HIRING AUTHORITY TO WHICH YOU ARE APPLYING? ☐ YES ☐ NO

RELATIVES

TO YOUR KNOWLEDGE, DO YOU HAVE ANY RELATIVES WORKING IN THIS AGENCY? ☐ YES ☐ NO

VETERANS' PREFERENCE

ARE YOU CLAIMING VETERANS' PREFERENCE UNDER 295.07, FLORIDA STATUTES (F.S.)? ☐ YES ☐ NO

If yes, required documentation (Form DD-214) must be submitted only if an offer of employment is made.

CERTIFICATION

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 any information I give may be investigated as allowed by law. I consent to the release of information about my ability, employment history, and fitness for employment by employers, schools, law enforcement agencies, and other individuals and organizations to investigators, human resources staff, and other authorized employees of the Clerk's Office for employment purposes. This consent shall continue to be effective during my employment if I am hired. I understand that the Clerk's Office 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. I understand it is the Clerk's Office policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA. If I am hired, I understand that I am free to resign at any time, with or without cause, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as required by 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 the Clerk's Office 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 an authorized employee. I understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard. I understand that applications submitted for employment are public records.

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.

SIGNATURE: _____ DATE: _____