

**LEVY COUNTY BOARD OF
COUNTY COMMISSIONERS
EMPLOYMENT APPLICATION**

Human Resource Office
310 School Street Bronson, FL. 32621
Mailing Address: Post Office Box 310
Telephone: 352.486.5219
Fax: 352.486.5167

- For:** **Planning Commission**
 Board of Adjustments
 Construction Industry Licensing Board

Instructions: Please print or type. Complete all items. If a question is not applicable, enter "N/A". Do not leave any sections blank. Failure to do so may result in loss of employment opportunities.

PERSONAL INFORMATION			
Last Name <i>McSween</i>	First Name: <i>Huber</i>	Middle: <i>Ward</i>	
Address: <i>11490 NE 105 st</i>		Home Phone: <i>352-486-5032</i>	
City, State, Zip Code <i>Archer FL 32618</i>		Cell Phone: <i>352-222-9265</i>	
County: <i>Levy</i>	Email Address: <i>mhuber55@yahoo.com</i>		

Relatives Employed By Levy County: Do you have any relatives by blood or marriage including elected officials, working for the Board of County Commissioners or other elected officials in Levy County Government? Yes No If yes, complete the following:

FULL NAME OF RELATIVE(S)	DEPT. OR OFFICE LOCATION	RELATIONSHIP

HAVE YOU EVER BEEN EMPLOYEED BY LEVY COUNTY COMMISSIONERS? Yes No If yes, from _____ to _____
Department: _____ Supervisors Name: _____ Reason For Leaving: _____

LAW VIOLATION RECORD: Have you ever been convicted, pled nolo contendere, or had the adjudication of guilt withheld in connection with any criminal offense in any civilian or military court? Yes No If yes, provide details. Note: A "yes" answer to this question 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 will be considered.

OFFENSE	DATE	PLACE	DISPOSITION

Do you have a Valid Florida Driver's License? Yes No

Are you on the exclusion list for the U.S. Department of Health and Human Services Office of Inspector General? Yes No

EDUCATION - TRAINING - SKILLS

Highest Education Level Attained? Less than HS HS Graduate Tech School Doctorate 2 Year College Some College Bachelors Some Grad School Master's MD,DDS,JD Post GED

Type of School	Name of School and State	Credit Hours Completed	Graduated		Type of Diploma or Degree	Major Field or Study
			Yes	No		
H S or Issuing Equivalent	Walton High FL		X			
Undergraduate College or Universities						
Graduate School						
Technical Vocational or Bus School	Lively Technical College	2000	X			HVAC

EMPLOYMENT HISTORY

Experience: Beginning with you most recent job, describe your employment history, including related volunteer or other non-paid experience. This information will be used to evaluate your qualifications for this job opening and will determine your eligibility to go on to the next step of the evaluation process. Describe additional related experience on a "Separate sheet and attach to Application."

Dates Employed	Employer	Address
From 3 / 1 / 2004	Levy County School Board	480 marshburn Dr
To / /	Supervisors Name	City
	Tracy Stockman	Bronson
	Supervisors Title	State
		FL
Your Title	Maintenance Foreman / HVAC Tech	
Did you Supervise: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Duties/Responsibilities	
No. Supervised: 15	Repair and maintain all heat + air units	
<input type="checkbox"/> Resigned <input type="checkbox"/> Terminated	Reason For Leaving	
	Still Employed	
	If present employer, may we contact? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Dates Employed	Employer	Address
From 8 / 1 / 1996	Ray French A/c	2915 NE 20 th way
To 3 / 1 / 2004	Supervisors Name	City
	Doyle Sikes	Gainesville
	Supervisors Title	State
		FL
Your Title	HVAC Tech	
Did you Supervise: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Duties/Responsibilities	
No. Supervised:	Repair + Replace A/c units	
<input type="checkbox"/> Resigned <input type="checkbox"/> Terminated	Reason For Leaving	
	To work at School Board	
Dates Employed	Employer	Address
From 5 / 1 / 1995	Benson's heating + air	
To 8 / 1 / 1996	Supervisors Name	City
	Tom Moady	Tallahassee
	Supervisors Title	State
		FL
Your Title	HVAC Tech	
Did you Supervise: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Duties/Responsibilities	
No. Supervised:	Repair + Replace A/c units	
<input type="checkbox"/> Resigned <input type="checkbox"/> Terminated	Reason For Leaving	
	Moved to Gainesville	

REFERENCES: List 3 references who are NOT relatives:				
NAME	COMPLETE ADDRESS (include zip code)	PHONE	OCCUPATION	YRS KNOWN
Willia Stockman	105 Rodgers Blvd # 701	949-0901	Maint. Dirct	18
Wilbur Dean	159 Wexler ID Gerson FL	214-8726	Cy Admin	27
John Colver	775 Town Ct 722	251-1388	Pracdo	5

LICENSES-CERTIFICATIONS-REGISTRATIONS				
Please Indicate any Professional/ Occupational Licenses or Registrations/ Certifications you currently hold:				
Name of License/Certification/Registration	Mac's Heating and Air		Expiration Date	State FL
Issued By: State of Florida	Number CAC	Issue Date	Date	
Name of License/Certification/Registration			Expiration Date	
Issued By:	Number	Issue Date	Date	State

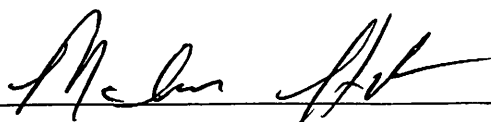
DRUG FREE WORKPLACE STATEMENT

Levy County is a drug free workplace, and as such is committed to providing an environment that encourages and supports a healthy, productive workforce and ensures safe working conditions.

PRE -EMPLOYMENT BACKGROUND CHECKS

Satisfactory completion of a pre-employment background check is a condition of employment with Levy County. Applicants selected for hire will be asked to provide specific information and documentation, which will be utilized to conduct a thorough background investigation.

I certify that the information contained in this application is correct and complete to the best of my knowledge, and understand that falsification of this application in any detail is grounds for disqualification from further consideration or the dismissal from employment. I hereby authorize investigation of all statements I have made herein. I authorize that the companies or persons named herein to give any information regarding my past employment, together with any information they may have regarding me, whether or not it is on their record. I hereby release said companies or persons, and Levy County Government from all liability for any damages whatsoever for issuing or obtaining this information. I understand that applications submitted for county employment are public records. In the event I am employed by Levy County, I agree to comply with all its policies, rules, and regulations.

Applicant's Signature:  Date: 1/11/22

All applications are subject to Florida Public Records Law

LEVY COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER