



**STATE OF FLORIDA
DEPARTMENT OF JUVENILE JUSTICE**

**EMPLOYMENT VERIFICATION – FORMER/CURRENT DJJ EMPLOYEES
FOR SUBMISSION TO DJJ BUREAU OF HUMAN RESOURCES ONLY**

Applicant _____ PF ID Number _____

Position Applied For: _____ Position Number _____

Current Employee _____ Former Employee _____

1. Dates of employment with DJJ:

From _____ to _____ at _____ hours per week.

2. What position did this person hold?

(If more than one position, please indicate specific dates for each position)

A) At initial employment _____

B) Last position held _____

3. Last Performance Evaluation Rating _____

4. Are any disciplinary actions in applicant's official personnel file? Yes No
If yes, please attach copy.

5. Please attach copy of any other job-related information in the personnel file that will assist in the decision-making process, such as IG reports, separation documents, etc.

Note: A staff member in the Bureau of Human Resources has completed this form based on review of the official personnel file. Prospective employers may wish to review the official personnel file rather than rely on our interpretation of it. If you would like to request to review a copy of the official personnel file, please let us know.

Completed by: _____
Name

Title

Date

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