

Florida Department of Revenue

Workforce Transition

Please Type or Print Clearly

Personal Interest Form						
Last Name	First Name			Middle Initial		
				1.		
Home Street Address	'	City	State	County	ZIP Code	
Area Code/Telephone Number		Area Code/Office	Area Code/Office Telephone Number			
Current Job Title (Class Title)		Position Number		Program/Location		
List other job titles (class titles) for which you qualify and would consider accepting:						
1.						
2.						
3.						
4.						
Would you consider relocating to another area of the state?						
(Check one) YES	NO					
If yes, list the counties you would consider:						
Would you consider employment with another state or local government agency?						
(Check one) YES	NO	iooui go	. 3			
If yes, please indicate which agencies below:						

(Please complete both pages of this form)

Veterans' Preference in Retention Only

Check the appropriate block if you are claiming Veterans' Preference for retention (Section Statutes). Veterans' preference shall be given in accordance with the state and federal law.

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- (1) A disabled veteran who has served on active duty in any branch of the United States Armed Forces, have received an honorable discharge, and have established the present existence of a serviceconnected disability that is compensable under public laws administered by the United States Department of Veterans Affairs; or
- (2) A disabled veteran who is receiving compensation, disability retirement benefits, or pension by reason of public laws administered by the United States Department of Veterans Affairs and the United States Department of Defense.
- (3) The spouse of a person who has a total disability, permanent in nature, resulting from a service-connected disability and who, because of this disability, cannot qualify for employment, and the spouse of a person missing in action, captured in line of duty by a hostile force, or forcibly detained or interned in line of duty by a foreign government or power.
- (4) A wartime veteran as defined in s. , who has served at least 1 day during a wartime period. Active duty for training may not be allowed for eligibility under this paragraph.
- (5) The un-remarried widow or widower of a veteran who died of a service-connected disability.
- (6) The mother, father, legal guardian, or unremarried widow or widower of a member of the United States Armed Forces who dies in the line of duty under combat-related conditions, as verified by the United States Department of Defense.
- (7) A veteran as defined in s. Active duty for training may not be allowed for eligibility under this paragraph.
- (8) A current member of any reserve component of the United States Armed Forces or the Florida National Guard.

An honorably discharged veteran seeking preference under Section 295.07, Florida Statutes, must furnish documentation of the following:

- 1. Military status, dates of service, and discharge type, i.e., the Department of Defense Form DD-214 or equivalent certification from the U.S. Department of Veterans' Affairs.
- 2. If claiming disability, certification from the U.S. Department of Veterans' Affairs or Armed Services that the applicant has a service-connected disability.
- 3. Proof of Florida residence.
- 4. Possession of the required licensure, certification, or registration, any required knowledge, skills, and abilities, and any other requirements the agency establishes for the position, as indicated on the position description.

Signature Date

Please return completed form to: Florida Department of Revenue

Human Resource Office

Mail Stop 1-3411

5050 W. Tennessee Street Tallahassee, FL 32399-0115

(Please attach a current, updated People First candidate profile and/or resume, if not already provided.)