



OPS Application

Requisition #:	Job Title:
Application Date:	

Personal Information

First Name: <i>Kyle</i>	Middle Name: <i>Allen</i>	Last Name: <i>Volle</i>	Other names used:
Address: <i>3691 Butler Rd Grantville</i>	City: <i>KS</i>	State enter NA if non US Address <i>KS</i>	Zip Code: <i>66429</i>
Primary Contact: <i>(785) 640-3706</i>	Alternate Contact Number: <i>(785) 286-2212</i>	Email Address: <i>Kyle.volle@gmail.com</i>	UFID if known: <i>9632-2586</i>
Have you ever worked at the University of Florida or another state of Florida Agency? <i>No</i>	Do you have a relative employed at the University of Florida? <i>No</i>	If yes, indicate names and departments:	If you are a current TEAMS or USPS employee and the positions you are applying for is outside your department, have you completed at least six months of satisfactory service in your current position?
If you are male between the ages of 18 - 26, are you registered for selective service? <i>Yes</i>		Are you presently eligible to work in the United States? <i>Yes</i>	
Do You agree to Abide by the UF Policies and Procedures and the UF Regulations? <i>Yes</i>			

Additional Information

How did you hear about employment opportunities with us?

High School Education or GED

Highest level completed:	High School Name:	City:	State:
<i>Diploma</i>	<i>Perry LeCompton H.S.</i>	<i>Perry</i>	<i>KS</i>

Additional Education (Start with most recent)

Name of School: <i>Georgia Institute of Technology</i>	Major if applicable: <i>Robotics</i>	Did you graduate? <i>No</i>	Type of Degree if applicable:
If no degree received, number of years completed: <i>2</i>			

Name of School: <i>University of Kansas</i>	Major if applicable: <i>Mechanical Engineering</i>	Did you graduate? <i>Yes</i>	Type of Degree if applicable: <i>B. Sci.</i>
If no degree received, number of years completed:			

Name of School: <i>Washburn University</i>	Major if applicable: <i>Physics</i>	Did you graduate? <i>Yes</i>	Type of Degree if applicable: <i>B. Sci.</i>
If no degree received, number of years completed:			

Employment Experience (Start with most recent)

Employer Name: <i>Georgia Tech</i>	City: <i>Atlanta</i>	State enter NA if a non US address <i>GA</i>	Begin Date: <i>9/13</i>
End Date:(leave blank if still employed)	Job Title: <i>Graduate Teaching Assistant</i>	Work Performed: <i>Administered Lab sessions</i>	Numbers of Hours Worked per Week: <i>15</i>
Most Recent Ending Salary: <i>\$2070 / month</i>	Supervisor Name: <i>Dr Jon Rogers</i>	Supervisor Title: <i>Assistant Professor</i>	Reason for Leaving: <i>N/A</i>
Employer Phone Number: <i>404-385-1600</i> May we contact this employer? <i>Yes</i>			

Employer Name: <i>Innovia Films Ltd</i>	City: <i>Tecumseh</i>	State enter NA if a non US address <i>Kansas</i>	Begin Date: <i>June 2012</i>
End Date:(leave blank if still employed) <i>August 2012</i>	Job Title: <i>Engineering & Safety Intern</i>	Work Performed: <i>Developed Safety Procedures</i>	Numbers of Hours Worked per Week: <i>40</i>
Most Recent Ending Salary: <i>\$15/hr</i>	Supervisor Name: <i>Vince DeGrava</i>	Supervisor Title: <i>EHS Manager</i>	Reason for Leaving: <i>School</i>
Employer Phone Number: 785-379-9402 (785) 379-9402 May we contact this employer? <i>Yes, Vince is no longer there however,</i>			

Employer Name:	City:	State enter NA if a non US address	Begin Date:
End Date:(leave blank if still employed)	Job Title:	Work Performed:	Numbers of Hours Worked per Week:
Most Recent Ending Salary:	Supervisor Name:	Supervisor Title:	Reason for Leaving:
Employer Phone Number: May we contact this employer?			

References

Name of Reference: <i>Jon Rogers</i>	Phone Number: <i>404-385-1600</i>	How do you know this reference? <i>Academic Advisor</i>
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Name of Reference: <i>Clayton Nguyen</i>	Phone Number: <i>316-992-7009</i>	How do you know this reference? <i>Former Classmate</i>
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Name of Reference: <i>Mercedith Langfitt</i>	Phone Number: <i>(785) 845-2760</i>	How do you know this reference? <i>Former co worker</i>
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Criminal History

Have you ever been convicted of a crime, pled guilty or no contest to a crime, had adjudication withheld and/or prosecution deferred, Driving Under the Influence, Driving while Intoxicated or other traffic convictions?	If NO, please enter "NA" If YES, please give exact dates and details: <i>NA</i>
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Agreement

I authorize and release the University of Florida to verify all information submitted in support of my application for employment, including but not limited to my application and resume. I certify that the application and/or resume submitted are a complete and accurate description of my work experience, education, and background. I further certify that the answers to the above questions are true and complete to the best of my knowledge. I understand that any false statements or omissions made by me on this form, my application, my resume, or any supplementary or subsequently submitted materials may be grounds for immediate discipline, up to and including discharge as well as disqualification from any further employment opportunities at the University of Florida or its affiliated organizations.

I agree to promptly disclose any criminal actions that may occur AFTER completing this application and while employed at the University of Florida. I further understand and agree that failure to completely disclose this information in the future to my supervisor and the Office of Human Resource Services, Employee Relations department within five (5) days of the action is just cause for my immediate dismissal from any employment at the University of Florida and removal from active consideration as an applicant for any position.

BY SIGNING BELOW, I certify that I have read and agree with these statements.

<u>Kyle Valle</u>	<u>Kyle Valle</u>	<u>4/24/14</u>
Print Applicant's Name	Applicant's Signature	Date

The University of Florida is an Equal Employment Opportunity Employer

With appropriate notice, reasonable accommodations will be made in the employment process for individuals with disabilities.

Voluntary Demographic Data	
Gender:	<input type="radio"/> Female <input checked="" type="radio"/> Male <input type="radio"/> Not Disclosed
Race:	<input type="radio"/> American Indian/Alaskan Native <input type="radio"/> Asian/Pacific Islander <input type="radio"/> Hispanic <input type="radio"/> Black <input checked="" type="radio"/> White <input type="radio"/> Not Disclosed
Are you a Veteran of U.S. Military Service?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> No Response
If yes, please specify:	
Do you wish to claim veteran's preference for qualified positions as covered by Chapter 295, Florida Statutes, or federal law?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> No Response
If yes, please check the appropriate box and provide documentation, to include a copy of your DD- 214, to Recruitment and Staffing, PO Box 115002, University of Florida, 32611-5002.	<input type="radio"/> Disabled Veteran <input type="radio"/> Spouse <input type="radio"/> Veteran of Wars <input type="radio"/> Unmarried widow or widower <input type="radio"/> No Response