5^{TH} JUDICIAL CIRCUIT CERTIFIED PROCESS SERVER CHECKLIST complete application packets are <u>**REQUIRED**</u> to ensure your class reservation

NAME:	 	 	
EMAIL ADDRESS:	 	 	

APPLICATION COMPLETE

CERTIFICATE OF GOOD CONDUCT AND OATH INCLUDED
CHECK PAYABLE TO THE STATE OF FLORIDA INCLUDED FOR \$250.00

or PAY ONLINE **HERE**

FINGERPRINT SCHEDULED AND/OR COMPLETE

TRAINING FEE OF \$155.00

Fifth Judicial Circuit Process Server Application

Date:				
Name:				
Address:				
	Г	'1 A 1 1		
Phone #:	Emai	il Address:		
Please list below the contact information you information confidential, please select the formation confidential in the select the se	-	blished on the regist N/A	ry. If you prefer to keep your contact	
Please note, some gated communities will no	•	•		
First Name:				
			Zip:	
Phone Number:	Email	Address:		
Are you currently working in another circuit	? If so, name wh	nich circuit:		
			YES NO	
• Are you eighteen (18) years of age or o	older?			
• Do you have any mental or legal disabi	ilities?			
• Are you a permanent Florida resident?				
Has your driver's license ever been susp	pended or revok	ed?		
Have you ever been arrested for a felon	=			
			High Calcal Distance	CED
1 /		T .:	High School Diploma	GED
High School Name:		Location:		
College or University:		Location:		
Degrees Attained:				
Additional Training:				
EMPLOYMENT HISTORY: JOB H	ISTORY FOR	R THE LAST 5 Y	EARS (MOST CURRENT FIRST):	
Job Title:	Supervisor:		Dates Employed:	
Company:	Address:		Phone:	
Job Description:				
Reason for leaving:				
Job Title:	Supervisor:		Dates Employed:	
Company:	Address:		Phone:	
Job Description:				
Reason for leaving:				
Job Title:	Supervisor:		Dates Employed:	
Company:	Address:		Phone:	
Job Description:				
Reason for leaving:				
Job Title:	Supervisor:		Dates Employed:	
Company:	Address:		Phone:	
Job Description:				
Reason for leaving:				
	,			
Job Title:	Supervisor:		Dates Employed:	
Company:	Address:		Phone:	
Job Description:				
Reason for leaving:				

I SWEAR OR AFFIRM THAT I WILL WELL AND FAITHFULLY DISCHARGE THE DUTIES IMPOSED UPON ME AS A CERTIFIED CIVIL PROCESS SERVER IN ACCORDANCE WITH ADMINISTRATIVE A-2008-21-C AND WILL ABIDE BY, AND EFFECT SERVICE OF PROCESS, IN ACCORDANCE WITH, THE APPLICABLE FLORIDA STATUTES AND RULES OF COURT.

I UNDERSTAND AND AGREE THAT AS A CERTIFIED CIVIL PROCESS SERVER, I WILL POST WITH THE ADMINISTRATIVE OFFICE OF THE COURTS, A BOND IN THE AMOUNT OF \$5,000.00 IN CASH OR WITH SURETIES APPROVED BY THE COURT FOR THE BENEFIT OF ANY PERSONS INJURED BY ME AS A RESULT OF ANY WRONGFUL ACT OR OMISSION RELATING TO MY ACTIVITIES AS A CERTIFIED CIVIL PROCESS SERVER.

I UNDERSTAND AND AGREE THAT AS AN APPLICANT FOR THE STATUS OF CERTIFIED CIVIL PROCESS SERVER, A FELONY BACKGROUND INVESTIGATION WILL BE PERFORMED TO ASSURE MY ELIGIBILITY FOR CERTIFICATION. I UNDERSTAND THE APPLICATION FEE IS NON-REFUNDABLE FOR ANY REASON PER ADMINISTRATIVE ORDER A-2008-21-C.

SIGNATURE OF APPLICANT

FIFTH JUDICIAL CIRCUIT CERTIFIED PROCESS SERVER

CERTIFICATE OF GOOD CONDUCT

ATE OF FLORIDA UNTY OF	
Before me, this day personally appeared	inst him/her. iction against him/her. i misdemeanor involving
	Signature
Subscribed and sworn to before me this Personally known or produced identification	day of, type of identification produced
STATE OF FLORIDA COUNTY OF	Notary Public
OATH OF OFFICE OF C	CERTIFIED PROCESS SERVER
I,	yer within the jurisdiction of the Fifth solemnly swear or affirm that I will of the state of Florida, and that I will
Florida Driver's License Number	Signature
Subscribed and sworn to before me this Personally known or produced identification	day of, type of identification produced
	Notary Public