



**Free parking for volunteers is provided when you park at the Judicial Parking Garage**

located at 505 Banyan Boulevard

Please bring your parking ticket to

the Reception Desk at the State Attorney's Office to be validated



## **DRIVING DIRECTIONS TO THE PARKING GARAGE**

- From I-95, exit OKEECHOBEE EAST, and stay in the right lane
- Go 3/4 mile to the 2nd ramp on the right, which is AUSTRALIAN AVE NORTH
- Take the north ramp, and then go 1 mile north on AUSTRALIAN AVE NORTH to BANYAN BLVD
- Turn right on BANYAN BLVD EAST, and go 4 blocks
- The juror entrance to the parking facility is on the left, On Banyan, between ROSEMARY AVE and QUADRILLE BLVD

## **PARKING**

- Please take a parking ticket as you enter the parking garage
- **Bring the parking garage ticket with you. Your ticket will validated once you arrive at the office lobby**
- Parking is **ONLY** validated if you park in the JUROR parking garage

## **LEVEL 4 PEDESTRIAN BRIDGE and**

## **DIRECTIONS TO THE OFFICE OF THE STATE ATTORNEY**

**Please allow at least 10 minutes to park your car and walk to the office**

This is the least confusing exit to use until you are familiar with the parking garage

***(the garage has several exits/entrances)***

- The parking garage is color coded for each floor; the bridge is on level 4
- Follow the straight bridge path, do not branch off to your left
- You can use either the elevator, escalator or the stairs to reach ground level
- The bridge actually crosses the RR tracks and North Quadrille
- Once you are at ground level-look to your right. The street in front of you is N. Quadrille
- Then, turn right onto 3rd St
- ***You will see the Public Defender side of the building on your left***
- Turn left onto N Dixie Hwy (You will need to cross 3<sup>rd</sup> Street)
- The address is 401 N Dixie Hwy, which will be on your left

## **LOBBY/RECEPTION ENTRY**

- Once you go through security, check in with the receptionist at the main desk.
- You will need to show your driver's license at the lobby desk and present your parking ticket to the receptionist to be validated.
- The front desk will call the volunteer office to announce that you are here, and we will come down to escort you.



# OFFICE OF THE STATE ATTORNEY



FIFTEENTH JUDICIAL CIRCUIT  
IN AND FOR PALM BEACH COUNTY

**Dave Aronberg**

**STATE ATTORNEY**

**401 N. Dixie Highway**

**West Palm Beach, FL 33401**

**Volunteer/Intern Program**

## **TIPS FOR COMPLETING THE VOLUNTEER/INTERN APPLICATION**

- Please print legibly.
- DO NOT convert the PDF of the Employment Application to a Word Document. You will have plenty of time to dazzle the office with your computer skills. Applications that have been converted will NOT, I repeat NOT be accepted.
- Complete all pages in the packet, including the Employment Application, which is required of all volunteers and interns. If you have a resume, please include it with your packet..
- ALL pages of the Employment Application must be completed. If you do not have work or volunteer history to fill pages 2 and 3, leave the pages blank but with your packet. Be sure to include with your application a clear copy of your driver's license **and** your Social Security card.
- Personal Inquiry Waiver **MUST** be notarized prior to application submission
- Applications should be returned to the Volunteer Program Coordinator (see below for contact information) via email, fax, US Mail or hand delivered to the State Attorney's Office.
- Be sure to keep a copy of the application for your files.
- All applications are acknowledged via email upon receipt.

- All completed applications will be processed, and a preliminary background check will be performed. If you are cleared to serve as a volunteer, an interview will be scheduled.
- If accepted into the Volunteer Program, a decision will be made on divisional placement and schedule.

Return applications to

Mary Ann Senatore-Volunteer Program Coordinator

State Attorney's Office, 15th Circuit

401 N. Dixie Highway

West Palm Beach, FL 33401

Office: (561) 355-7249

Fax: (561) 366-1803

[msenatore@sa15.org](mailto:msenatore@sa15.org)

*Revised Friday, January 10, 2020*



# PERSONAL INQUIRY WAIVER

OFFICE OF THE STATE ATTORNEY – 15<sup>TH</sup> JUDICIAL CIRCUIT  
401 NORTH DIXIE HIGHWAY, WEST PALM BEACH, FLORIDA 33411



TO: Concerned Person or authorized Representative of any Organization of Repository Records

APPLICANT'S NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_ SOCIAL SECURITY NUMBER: \_\_\_\_-\_\_\_\_-\_\_\_\_

I respectfully request and authorize you to furnish the Office of the State Attorney, 15<sup>th</sup> Judicial Circuit, any and all information that you may have concerning my work record, school record, military record, reputation and financial and credit status. This information is to be used to assist the Office of the State Attorney in determining my qualifications and fitness for the position I am seeking with the Office of the State Attorney, 15<sup>th</sup> Judicial Circuit.

I hereby release you, your organization or others from any liability or damage which may result from furnishing the information requested. I hereby acknowledge that I have read this Personal Inquiry Waiver form, fully understand its purpose and give my consent for the release of the described records and information freely and voluntarily.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/20\_\_

### STATE OF FLORIDA- COUNTY OF PALM BEACH

Before me personally appeared the above-named applicant: \_\_\_\_\_

who is

Personally known to me *Or*

Has exhibited to me a reliable form of identification issued within the past five (5) years, to wit: (exact type of identification relied upon).

Driver's License: \_\_\_\_\_

Other Identification: \_\_\_\_\_

Subscribed in my presence on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_ . As oath not taken.

\_\_\_\_\_, Notary Public

Signature of Notary

\_\_\_\_\_  
Print or Type name as commissioned) Stamp/Seal



Office of the State Attorney-15<sup>th</sup> Judicial Circuit -State Attorney Dave Aronberg  
**LIVSCAN SECURITY AND BACKGROUND QUESTIONNAIRE- PLEASE PRINT**



**Personal Data**

Name: \_\_\_\_\_  
*Last First Middle*

Aliases: \_\_\_\_\_ Social Security# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date of Birth \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Place of Birth: \_\_\_\_\_  
*City State Country*

Country of Citizenship:  United States or \_\_\_\_\_

Current Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Previous Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Home Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Physical Description**

Gender:  Male  Female  Unknown

Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Height: \_\_\_FT \_\_\_IN Weight: \_\_\_\_\_LBS

**Race:**

- A – Chinese, Japanese, Filipino, Korean, Polynesian, Indian, Indonesian, Asian Indian, Samoan or any other Pacific Islander
- B – Person having origins in any of the black racial groups of Africa
- I – American Indian, Eskimo or Alaskan native or a person having origins in any of the 48 contiguous states of the United States of America
- U – of indeterminable race
- W – Caucasian, Mexican, Puerto Rican, Cuban, Central of South American or other Spanish culture or origin regardless of race

**To Process This Application- Copies of Proper Identification Must Be Provided**

Photo ID, such as  Driver License OR  State ID OR  Passport

AND

Original Social Security Card OR  Birth Certificate

**Office Use Only**

Background Check: Cleared: \_\_\_\_\_ Declined: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_/\_\_\_\_\_/20\_\_\_\_

*Chief Investigator or Deputy Chief Investigator*

FCIC/NCIC \_\_\_\_\_ CCIS \_\_\_\_\_ PALMS \_\_\_\_\_ JUV HIS \_\_\_\_\_ Date: \_\_\_\_\_/\_\_\_\_\_/20\_\_\_\_