

BLUFF CITY TENNESSEE

APPLICATION FOR EMPLOYMENT

The Town of Bluff City is an equal opportunity employer and does not discriminate on the basis of race, sex, color, religion, national origin, age, disability or veteran status in employment opportunities and benefits.

Overview of the hiring and employment process: This application is but one part of the hiring and employment process. Other parts may include an interview, an employment examination or test, and a demonstration of an ability to perform the essential functions of the job.

If you need an accommodation in order to complete the application or any part of the hiring and employment process, please call the following number: **(423) 538-7144**.

Prior to completing this application, be sure to read the Job Description of the position for which you are applying. As you complete the application, please bear in mind the following:

- We reserve the right to check all information for accuracy and completeness;
- All applicants for employment are a matter of public record.
- -if you need accommodation in order to complete this Application, please notify the municipality.

GENERAL INFORMATION

Name:

Date:

Position Desired

Are you applying for:

Full time

Part Time

Seasonal

If part time, what days/hours are you available?

Have you been employed by the city before?

Yes

No

Phone

()

()

HOME

BUSINESS

Address

NUMBER

STREET

CITY

STATE

ZIP CODE

Social Security Number

Do you have a legal right to work in the U.S.?

Yes

No

Are you over the age of 18?

Yes

No

Have you ever been convicted of a felony?

Yes

No

(Note: This may be relevant if job-related, but does not bear you from employment):

If yes, please explain:

Driver's license number:

YOUR EDUCATION AND TRAINING

High School Attended:

CITY

STATE

Do you have a high school diploma Yes No

PLEASE LIST OTHER EDUCATION YOU HAVE RECEIVED:

| COLLEGE/UNIVERSITY/ TRADE OR BUSINESS SCHOOLS ATTENDED | CITY/STATE | DEGREE EARNED? - TYPE DEGREE | MAJOR AREA OF STUDY |
|--|------------|---------------------------------|------------------------|
| | | | |
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LIST OTHER TRAINING RECEIVED (special course, work training programs, armed forces training, etc.)

LIST SPECIAL QUALIFICATIONS AND SKILLS (licenses, skills with machines, patents or inventions, publications, etc.)

BASED ON THE JOB DESCRIPTION OF THE POSITION FOR WHICH YOU ARE APPLYING:

Are you able to perform the essential functions of the job for which you've applied (note: you may later be asked to demonstrate your ability to perform the essential function)? Yes No

REFERENCES

Please list three of four persons, other than Relatives or former employers, who have knowledge of your character and/or abilities:

| NAME | MAILING ADDRESS | YEARS KNOWN | PHONE |
|------|-----------------|----------------|-------|
| | | | |
| | | | |
| | | | |
| | | | |

PRIOR EMPLOYMENT RECORD

LIST BELOW ALL PRESENT AND PAST EMPLOYMENT INFORMATION AND/OR SUBSTANTIVE VOLUNTEER WORK:

Name and address of current or most recent employer:

Phone:

Your Supervisor:

Your Job Responsibilities:

Date Hired:

Date Left:

Reason for leaving:

Starting Salary:

Ending Salary;

May we contact this employer?

Yes

No

Name and address of previous employer:

Phone:

Your Supervisor:

Your Job Responsibilities:

Date Hired:

Date Left:

Reason for leaving:

Starting Salary:

Ending Salary;

May we contact this employer?

Yes

No

Name and address of previous employer:

Phone:

Your Supervisor:

Your Job Responsibilities:

Date Hired:

Date Left:

Reason for leaving:

Starting Salary:

Ending Salary;

May we contact this employer?

Yes

No

IMPORTANT

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I understand that falsified information or significant omissions may disqualify me and my application from further consideration for employment and may be considered justification for dismissal if discovered at a later date. I waive any right of privilege, privacy, and/or confidentiality I may have in the information provided by references or others whom I have indicated may be contacted.

Applicant Signature:

Date:
