



## APPLICATION FOR EMPLOYMENT

Revised and Adopted May 2018

Hamblen County Government is an Equal Opportunity Employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin disability status, protected veteran status, or any other characteristic protected by law.

### PERSONAL INFORMATION

*Incomplete information could disqualify you from further consideration. Please complete all fields.*

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

E-mail Address \_\_\_\_\_

Home Phone # \_\_\_\_\_ Mobile Phone # \_\_\_\_\_

Are you eligible to work in the US?  Yes  No

Are you at least 18 years or older?  Yes  No (If no, you may be required to provide authorization to work.)

Have you ever been terminated from employment or asked to resign by an employer?  Yes  No  
If yes, please provide company names and details.

Can you work any shift?  Yes  No

Can you work overtime, including weekends?  Yes  No

Are you able to perform the essential functions of the job for which you are applying?  Yes  No

### EMPLOYMENT DESIRED

Date you can start \_\_\_\_\_ Hourly Rate/Salary Desired \_\_\_\_\_

Position desired \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ If so may we inquire of your present employer?

### REFERRAL SOURCE

How did you hear about us? (Circle) Walk in Advertisement Referral Other

Have you worked for Hamblen County before?  Yes  No Explain: \_\_\_\_\_

Do you know anyone who works for Hamblen County?  Yes  No, if so, explain

EDUCATION	Name & location of school	No. years attended	Degree received	Subjects Studied Major
High School				
College or University				
Trade, Business, or Correspondence School				

**EMPLOYMENT HISTORY** - Include your last seven (7) years of employment history including periods of unemployment, starting with the most recent and working backwards in time. *Incomplete information could disqualify you from further consideration* **Use additional paper if necessary.**

From	To	Employer Name	Phone Numbers, E-mail
Job Title	Nature of Work Performed, Responsibilities		Immediate Supervisor/Title
Reason for Leaving			
From	To	Employer Name	Phone Numbers, E-mail
Job Title	Nature of Work Performed, Responsibilities		Immediate Supervisor/Title
Reason for Leaving			
From	To	Employer Name	Phone Numbers, E-mail
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From	To	Employer Name	Phone Numbers, E-mail
Job Title	Nature of Work Performed, Responsibilities		Immediate Supervisor/Title
Reason for Leaving			

Do you have any special skills, experience, and/or training related to the position for which you are applying?

Yes  No If Yes, please describe: \_\_\_\_\_

\_\_\_\_\_

**Computer Skills?** Please Describe: \_\_\_\_\_

\_\_\_\_\_

**REFERENCES** – Give the names of three persons **not** related to you, whom you have known at least three (3) years.

Name	Address, Phone, E-mail	Company	Years Acquainted

**Please read carefully before signing.**

Hamblen County Government is an equal opportunity employer, does not discriminate in employment based on race, color, religion, national origin, citizenship status, ancestry, age, sex, sexual orientation, marital status, physical or mental disability, genetics, military status, or unfavorable discharge from military service.

I understand that if I am selected for **any** position with Hamblen County Government, I will be required to pass a drug test in compliance with our **Drug-Free Workplace Policy**.

I understand that if I am selected for a position with the Hamblen County Sheriff's Department, I will also be required to pass physical and psychological exams. This is a **bona fide occupational requirement (BFOQ)** reasonably necessary to the essential functions of the job.

I understand that neither the completion of this application nor any other part of my consideration or employment establishes any obligation for Hamblen County Government to hire me. If I am hired, I understand that either Hamblen County Government or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Hamblen County Government has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to Hamblen County Government true and complete information on this application (and any attached resume). No requested information has been concealed.

I authorize Hamblen County Government to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Date \_\_\_\_\_ Printed Name \_\_\_\_\_

Signature \_\_\_\_\_