

## **Cumberland County Tennessee**

## **Employment Application**

Cumberland County, Tennessee is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status. If offered employment, you will be required to provide documentation to verify eligibility. All Applicants may be subject to a background check. Further, depending on the position for which you are applying, you may be subject to pre-employment drug testing. Please answer all questions. If a question does not apply to you, answer with "No" or "NA" for "Not Applicable." \* Required Fields

Applicant Information*										
Full Name:					Date:					
	Last		First				M.I.			
Address:  Street Address						Ana	rtment/Unit #			
	Sireei Address							Ари	итень Они н	
	City						State	ZIP	Code	
Phone:				Ema	ail					
Date Available: Department.:			nt.:	Desired Salary:						
Position App	olied for:									
Are you 18 y	rears or older?		10 ]			Are yo	ou authorized to wo	rk in the U	yes J.S.? □	NO
		YES	NO				I	Full Time	Part Time	
Are you 21 ye	ears or older?						Shift Preference			
	to perform the essen				YES	NO				
Do you have any relatives/friends who work for Cumberland				d	YES	NO				
County? If yes, who an	nd where do they work	:?			Ц					
	<del></del>									
	er worked for County before?	YES NO	If yes, when?							
Have you ever last seven year If yes, explain		a felony in	the YES	NO						

Education							
High School: City & State:							
From:	To: Did you graduate?	YES	NO	Diploma:			
College:	Address:						
From:	To: Did you graduate?	YES	NO	Degree:			
Other:	Address:						
From:	To: Did you graduate?	YES	NO	Degree:			
	pleted any special courses, seminars and/or puld enable you to perform the position for which ag?	YES	NO	If yes, please describe below:			
	Refere	ences					
Please list thre	ee references (not relatives or employers).	CHCCB					
Full Name: Relationship:							
Company:							
Full Name:				Relationship:			
Company:	Phone:						
Full Name:	e: Relationship:						
Company: _	Phone:						
	Previous Er	mployn	nent				
Are you curren	tly employed?						
Have you ever  YES NO	been discharged or asked to resign from a job? If yo	es please	e explair	ı: 			
Company:				Phone:			
Address: _				Supervisor:			
Job Title:	Starting Sa	Ending Salary:\$					
Responsibilitie	s:						
From:	To:	Reason for Leaving:					
May we contac	t your previous supervisor for a reference?	YES		NO			

A 1.1			_					
Address.				Supervisor.	Supervisor:			
Job Title:	Starting	Ending Salary:						
Responsibilities:								
From:	To:	Reason f	for Leaving:_					
May we contact yo	our previous supervisor for a reference?	YES	NO					
C				Phone:				
A 1.1								
Job Title:	Starting	Ending Sa	alary:\$					
Responsibilities:								
From:	To:	Reason f	for Leaving:_					
May we contact yo	our previous supervisor for a reference?	YES	NO					
	Milita	ry Service						
	Are you a military veteran?			YES	NO			
Branch and Rank:								
	es, while in the military, did you complete any d enable you to perform the position for which			and/or	YES	NO		
	Disclaimer	and Signat	ure					
knowledge and at performance. I he time, could result employed, falsifie basis for dismissa the policies, rules rules, regulations implied employme	that the facts set forth in the above employmenthorize CUMBERLAND COUNTY to verify the reby release CUMBERLAND COUNTY from obtaining and having an employment of statements of any kind or omissions of factal. I understand that should an employment of and regulations of employment of the Employment nor anything said during the ent contract. I understand that any employment at an apployer may terminate my employment at an anything response to the contract.	y their accura om any/all lial decision base cts called for co offer be exten loyer. Howev te interview po nent offered is	acy and to ob bility of wha ed on such in on this appli ided to me an er, I further rocess shall is for an indej	stain reference tever kind and afformation. I uscation shall be and accepted thunderstand the deemed to clinite duration	information on nature which, a nderstand that, a considered sugat I will fully acut neither the poconstitute the te	a my work at any if fficient dhere to olicies, erms of an		
Signature:				Date:				