



Employment Application
City of Maryville
AN EQUAL OPPORTUNITY EMPLOYER

NOTICE TO APPLICANTS

We are proud to be a drug free workplace. Screening tests for illegal drug use may be required before hiring and during employment.

This document is a public record and open to inspection by any citizen of the State of Tennessee pursuant to TCA Section 10-7-503.

Human Resources

404 West Broadway
Maryville, TN 37801
(865) 273-3425

Nepotism policy prohibits hiring members of the immediate family of a current City government service employee or a member of the Maryville City Council. Minimum of a high school diploma or equivalent required. Valid TN drivers license required. Positive identification will be required. Attach any additional information or documents to this application.

Last Name _____ First _____ Middle _____

Date of Application _____

Applications are available only for open positions for which public notice has been made. Please indicate the specific advertised position you are applying for in the space provided.

How did you hear about this position?

Local newspaper City website Referred by: _____
 Knoxville newspaper Municipal building posting Other: _____

AUTHORIZATIONS

I authorize investigation of all statements contained in this application, and it is understood and agreed that any misrepresentation by me in this application will be sufficient for cancellation of the application and/or for separation from City service if I have been employed.

I hereby authorize any person or organization whose name I have given as reference, or by whom I have been previously employed, to furnish the City of Maryville any information they may have concerning me, and I hereby release all such persons and organizations from any claims for damages. I understand that a background check may include social networking and on-line searches.

I hereby authorize investigation of my criminal record.

I agree, if employed, to abide by all the rules, regulations and ordinances in the City of Maryville.

I understand that the completion of this Application of Employment does not constitute an offer of employment.

I further understand that if I am employed by the City of Maryville this Application for Employment will not constitute a contract of employment.

I understand that, if the position for which I may be hired involves driving City vehicles, proof of a valid driver's license is required at initial employment and that the City also requires me to notify Human Resources within seventy-two (72) hours if there is a change of status of my driver's license.

I certify that the information I have given is true and correct to the best of my knowledge.

SIGNATURE: _____ DATE: _____

To sign this form: Click on the signature line. Choose configure digital I.D. Create new digital I.D. Save to file. Enter email address. Choose where you'd like to keep this signature file on your computer. Create a password. Save. Enter your password. Your document is signed.

REFERENCES

Please list persons, other than relatives or personal friends, who have knowledge of your character and/or abilities.

Name: _____ Relationship: _____

Phone: _____ Years known: _____

Name: _____ Relationship: _____

Phone: _____ Years known: _____

Name: _____ Relationship: _____

Phone: _____ Years known: _____

Name: _____ Relationship: _____

Phone: _____ Years known: _____

Signature: _____ Date: _____

PERSONAL

Email Address _____ Phone Number _____

Present Address _____ City _____ State _____ Zip _____

Are you over the age of 18? Yes ___ No ___

Federal and applicable state laws prohibit discrimination on the basis of age.

Are you legally eligible for employment in the United States? Yes ___ No ___

What date can you begin work? _____ Desired starting salary/rate: _____

Have you ever applied for employment with the City of Maryville before? Yes ___ No ___

If yes; when, what job: _____

Would you accept temporary work? Yes ___ No ___ Part-time work? Yes ___ No ___

Have you ever been convicted of a misdemeanor or felony? Yes ___ No ___

If yes, explain fully: _____

Answering yes to this question does not automatically disqualify you from consideration for employment.

Do you have any relatives working for the City of Maryville?

Yes ___ No ___ Indicate relation _____

Do you hold a valid Tennessee Driver's License? Yes ___ No ___ License No. _____ State Issued _____

Complete only if applying for Police Officer or Firefighter:

Birth Date: _____ / _____ / _____ Are you a U.S. citizen? Yes ___ No ___

EDUCATION - TRAINING

High School Name and Location of School _____

Course of Study _____ Number of Years Completed _____

Did you Graduate? Yes ___ No ___ Degree or Diploma _____

Business/Trade Technical Name and Location of School _____

Course of Study _____ Number of Years Completed _____

Did you Graduate? Yes ___ No ___ Degree or Diploma _____

College Name and Location of School _____

Course of Study _____ Number of Years Completed _____

Did you Graduate? Yes ___ No ___ Degree or Diploma _____

Graduate School Name and Location of School _____

Course of Study _____ Number of Years Completed _____

Did you Graduate? Yes ___ No ___ Degree or Diploma _____

If you did not complete high school, do you have a G.E.D. ? Yes ___ No ___

EMPLOYMENT

Please give accurate, complete full-time and part-time employment record. Start with present or most recent employer.

Present Company Name _____ Telephone (____) _____
Address _____ City _____ State _____ Zip _____
Employed - (State month and year) From _____ To _____
Name of Supervisor _____ Salary Start _____ Last _____
Job Title and Duties _____
Reason for Leaving _____

Previous Company Name _____ Telephone (____) _____
Address _____ City _____ State _____ Zip _____
Employed - (State month and year) From _____ To _____
Name of Supervisor _____ Salary Start _____ Last _____
Job Title and Duties _____
Reason for Leaving _____

Previous Company Name _____ Telephone (____) _____
Address _____ City _____ State _____ Zip _____
Employed - (State month and year) From _____ To _____
Name of Supervisor _____ Salary Start _____ Last _____
Job Title and Duties _____
Reason for Leaving _____

Previous Company Name _____ Telephone (____) _____
Address _____ City _____ State _____ Zip _____
Employed - (State month and year) From _____ To _____
Name of Supervisor _____ Salary Start _____ Last _____
Job Title and Duties _____
Reason for Leaving _____

We may contact the employers listed above unless you indicate those you do not want us to contact.

DO NOT CONTACT Employer _____ Number(s) _____
Reason _____

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Reason _____

MILITARY

Did you serve in the U.S. Armed Forces? Yes ___ No ___ If yes, what branch? _____

Describe any training received relevant to the position for which you are applying: _____
