

Name: \_\_\_\_\_  
Last First Middle Initial

Date: \_\_\_\_\_

## SEVIER COUNTY JUVENILE FACILITY Application for Employment

To the Applicant: We appreciate your interest in employment with Sevier County Government, and we assure you that we are sincerely interested in your qualifications. In order to get a better understanding of your background, we ask that you fill out this application completely. Your accurate completion of this form will assist us in ensuring that your qualifications will be considered when we are making our staffing decisions. Your application will be retained for a period of one (1) year following your application date. If you wish to be considered for future vacancies, you must notify Personnel Office during the posted application period to activate your application.

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Last First Middle Initial

Present Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Dates of Military Service & Branch: \_\_\_\_\_

Position Desired: \_\_\_\_\_

When are you available to begin working? \_\_\_\_\_ What is the minimum wage you could accept? \_\_\_\_\_

How did you learn of this vacancy?  Newspaper ad  Sevier County Web page  
 Sevier County employee  Sevier County Job Line  From a friend  
 Other: \_\_\_\_\_

Have you worked for Sevier County Government previously?  No  Yes  
If yes, provide your job title and employment dates: \_\_\_\_\_

Do you have any relatives currently working with Sevier County Government?  No  Yes  
If yes, give their name and relationship: \_\_\_\_\_

Have you ever been convicted of a criminal offense?  No  Yes  
If yes, list offense(s) and date(s) of conviction: \_\_\_\_\_

The existence of a criminal record does not constitute an automatic bar to employment.

Professional or Occupational License(s) you hold: \_\_\_\_\_

Do you have a valid TN Driver's License (class D)?  No  Yes  
List any other class or endorsement license(s) you have: \_\_\_\_\_

Have you been found guilty of a moving violation within the past three years?  No  Yes  
If yes, please explain: \_\_\_\_\_

### Education History

Circle the highest grade you completed. Grade School: 1 2 3 4 5 6 7 8 High School: 9 10 11 12 Other: BA BS MA MS PhD MD		
Name and Address of Educational Institute(s)	Major Subject	Type of Degree
1)		
2)		
3)		

**Employment History: Please list all employers starting with present or most recent employer**

Employer's Name:	Employer's Address:	Supervisor's Name:	Job Duties:
Job Title:	Reason for Leaving:	May we contact this employer?	
Hiring Date:	Separation Date:	Employer's phone number:	
Starting Salary:	Ending Salary:		

Employer's Name:	Employer's Address:	Supervisor's Name:	Job Duties:
Job Title:	Reason for Leaving:	May we contact this employer?	
Hiring Date:	Separation Date:	Employer's phone number:	
Starting Salary:	Ending Salary:		

Employer's Name:	Employer's Address:	Supervisor's Name:	Job Duties:
Job Title:	Reason for Leaving:	May we contact this employer?	
Hiring Date:	Separation Date:	Employer's phone number:	
Starting Salary:	Ending Salary:		

I hereby authorize Sevier County Government to make an investigative report whereby information is obtained through personal interviews with third parties, such as business associates. I understand that I will be required to pass a post-offer physical that includes a drug test. I acknowledge that if I am employed, my employment will be at-will, and can be terminated with or without cause at any time by Sevier County Government or myself.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**COURT DATA**

Have you ever been arrested or charged with any criminal violation? Yes \_\_\_\_\_ No \_\_\_\_\_

List all such matters, even if not formally charged or no court appearances or found not guilty, or pled guilty or nolo contendere to any charge for which adjudication of guilt was withheld or matter if settled by payment or fine or forfeiture of collateral

Date	Place/Agency	Charge	Final Disposition

WARNING: Pursuant to TCA 71-3-507 any person falsifying information shall be prosecuted.

**References:**

Name	Contact Number	Relationship/Years Acquainted
1)		
2)		
3)		

Have you ever been employed by Law Enforcement, Corrections, or Public Safety? \_\_\_\_\_.

**FORMS TO BE FURNISHED WITH SUPPLEMENTAL APPLICATION:**

- Copy of BIRTH CERTIFICATE
- Copy of HIGH SCHOOL DIPLOMA or GED Certificate
- Copy of MILITARY DD-214 (If Applicable)
- Copy of TENNESSEE DRIVERS LICENSE
- Copy of SOCIAL SECURITY CARD
- Copy of ANY TRAINING Certificates(If Applicable)

I hereby authorize Sevier County Juvenile Facility to make an investigative report whereby information is obtained through personal interviews with third parties, such as business associates and specifically authorize the release of any and all information from former employers, agencies both public and private, and relatives and acquaintances in relation to the employment application, including credit bureaus. I acknowledge that if I am employed, my employment will be at-will, and can be terminated with or without cause at any time by Sevier County Government or myself.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_