



Town of Nolensville

7218 Nolensville Road
Nolensville, TN 37135
Phone: 615-776-3633
Fax: 615-776-3634

Employment Application

Applicant Information	
Position Applied for:	_____
Department:	_____
Full Name: _____	Are you over 18 years of age? YES NO
<i>Last</i> _____ <i>First</i> _____ <i>M.I.</i> _____	
Address: _____	_____
<i>Street Address</i> _____	<i>Apartment/Unit #</i> _____
_____	_____
<i>City</i> _____	<i>State</i> _____ <i>ZIP Code</i> _____
Mobile Phone: _____	Home Phone: _____ Other: _____
E-mail Address: _____	
Type of Employment Desired: Full Time Part Time Temporary Seasonal	Desired Salary: \$ _____
Date Available for work: _____	Will you work overtime if required? YES NO
Do you have a valid TN driver's license? YES NO	DL Number: _____
State Issued: _____	Type/Class (<i>Operator, Commercial, etc.</i>) _____
Are you a citizen of the United States? YES NO	If no, are you legally eligible for employment the U.S.? YES NO <small>(Proof of US citizenship or immigration status will be required upon employment)</small>
Have you ever been convicted of a crime? <small>(Such conviction may be relevant if job related, but may not bar you from employment)</small> YES NO	If yes, please explain: _____
Have you ever used illegal drugs? YES NO	If yes, when and what type of drug(s): _____
Have you ever had a court judgment or lien filed against you? YES NO	If yes, please explain: _____
Have you ever worked for the Town? YES NO	If yes, when? _____
Are you related by blood, adoption or marriage to a current employee or official of the Town of Nolensville? YES NO	
If so, to whom? _____	What is your relationship? _____
How did you learn about this employment opportunity? _____	
If a current Town employee assisted in recruiting you, what is the name of that employee? _____	

Previous Employment

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
YES NO LATER
May we contact your previous supervisor for a reference?

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
YES NO LATER
May we contact your previous supervisor for a reference?

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
YES NO LATER
May we contact your previous supervisor for a reference?

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
YES NO LATER
May we contact your previous supervisor for a reference?

Comments *(including any gaps in employment)*

Skills and Qualifications: Summarize special skills and qualifications acquired from employment or experiences that may qualify you to work for the Town of Nolensville, such as licenses, certifications, types of heavy equipment operated, types of computer programs operated, etc.

Education

High School: _____ Degree _____
Did you graduate? YES NO Highest grade completed _____ Do you have a GED? YES NO

College: _____ Address: _____
Number of years completed: _____ Did you graduate? YES NO Degree: _____
Number of hours completed: _____ Major: _____ Minor: _____

Other: _____ Address: _____
Number of years completed: _____ Did you graduate? YES NO Degree: _____
Number of hours completed: _____ Major: _____ Minor: _____

References

Please list three business/work references who are not related to you and are not previous supervisors.

Full Name: _____ Years Known: _____
Company: _____ Phone: _____

Full Name: _____ Years Known: _____
Company: _____ Phone: _____

Full Name: _____ Years Known: _____
Company: _____ Phone: _____

List professional, trade, business, or civic associations and any offices held. *(Exclude memberships which would reveal sex, race, religion, national origin, age, color, disability or other protected status.)*

Organization: _____ Office Held: _____
Organization: _____ Office Held: _____
Organization: _____ Office Held: _____

List any personal circumstances *(such as relocation, retirement, school attendance, etc.)* that would assist us in placing you in a position to best accommodate your lifestyle.

List any additional information you would like us to consider:

Law Enforcement Experience

Have you attended a law enforcement training academy? YES NO Did you graduate YES NO
Name of Academy: _____ Dates attended _____
Have you ever been decertified by POST Commission YES NO If yes, please explain: _____

Please attach copies of any certificates of training and/or other qualifications

Military Service

Branch: _____ From: _____ To: _____
Rank at Discharge: _____ Type of Discharge: _____
If other than honorable, explain: _____

Please attach DD214 Form

Disclaimer and Signature

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

The employment application is but one part of the hiring process, which 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 any part of the hiring and employment process, please contact the Human Resources Department.

I certify that, to the best of my knowledge and belief, all of the information and statements provided by me in and with this application are true, correct, complete and provided in good faith.

It is understood and agreed that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed.

I give the Town of Nolensville the right to investigate all references and to secure additional information about me. I consent to the release of information to the Town of Nolensville about my ability and fitness for employment by employers, schools, law enforcement agencies and other individuals and organizations. I hereby release from liability the Town of Nolensville and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

The Town of Nolensville is an Equal Opportunity Employer. The Town of Nolensville does not discriminate in employment and no questions on this application is sued for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state, or federal law.

Understand that just as I am free to resign at any time, the Town of Nolensville reserves the right to terminate my employment pursuant to the Town's Personnel Rules and Regulations. I understand that no representative of the Town of Nolensville has the authority to make any assurances to the contrary.

Applicant Name: _____ Date: _____