Knox County Application for Employment

ANSWER ALL QUESTIONS COMPLETELY. Please print. Use blue or black ink. If hired, this application becomes a permanent record. This application will be retained for a one (1) year period. Knox County is an equal opportunity employer who guarantees compliance to all applicable Federal and State laws. Every applicant for employment and employee has the right to equal consideration without regard to race, color, religion, national origin, sex, age, marital status or veteran status.

Position Applying for			Date_		
Name					
Last	First	Ā	Middle Initial		
Present Address				Phone Number	
Street	City	State	Zip		
Previous Address				Social Security Number	
Street	City	State	Zip		
How long at present ad Have you been employe		No		dress?	
Do you have any relative No Yes (If yes, a					
Are you currently emp	loyed?NoY	es May we conta	ct your pres	ent employer?NoYes	
Date you can start work? Available for: Full-time Part-time Temporary					
Are you currently on ". (Give Company Name a					
Have you ever been conNoYes (Explain		,			
Are you a veteran of thNoYes (Branch a		rvice?			
Do you have any physic to perform job related No Yes (Explain	duties?	d impairments or	disability, w	hich would limit your ability	

EDUCATION

Schools	Print name, city and State For each school listed	Dates (Mo/Yr)	Type course or Major	Graduated? List degree
High School		From To		Yes No
College		From To		Yes No
Graduate		From To		Yes No
Other		From To		Yes No
	any specialized training, appre		and extracurricula	r activities:
State any application	additional information you fee n:	el may be helpfu	I to us in consider	ing your
members	essional, trade, business or civi hips that would reveal sex, rac or other protected status.)			

Employment History (Start with your present or last job)

Dates	Name & Address of Employer	Salary	Responsibilities	
From		Starting_		
То		End		
Job Title	Sur			
	eavingSup	A 1201		
From		Starting		
То		End		
Job Title				
Reason for l				
From		Starting_	-	
To		End		
Job Title	Sup	ervisor		
Reason for le				
From			<u>.</u>	
To		End		
Job Title	Sup	emicar		
Reason for le	caving			
Special skills from employ	s and qualifications (summarize speci ment or other experience.)			
References (Give three references who are not re-	lated and not p	previous employers.)	
Name (and rel	elationship) Address	e week	elephone Number	
3.				
		, management and an analysis of the second		

Applicant Statement

I certify that the information contained in this application is true and complete to the best of my knowledge. I understand that any misrepresentation of fact, as stated or implied, given in my application, interviews, or other employment forms will be sufficient reason not to hire me and may result in my discharge if I am hired.

I authorize investigation of all statements contained in this application as may be necessary in arriving at an employment decision. I understand that I waive any rights I have to receive notice from any persons listed on this application regarding the release of information relating to this application for employment with Knox County.

I understand that I may be required to submit to pre-employment drug testing, and I hereby waive any and all objections to such testing. I understand that the results of such testing may have the effect of disqualifying me for a position or any position of employment with Knox County.

I understand that Knox County is in no way obligated to provide employment and that I am in no way obligated to accept employment with the County. Nothing in this application is intended to create any contract of employment, expressed or implied, or to create any rights in the nature of a contract of employment. This application does not bind either party for any specific period of employment.

If I am hired, nothing shall restrict my right as an employee to terminate my employment at any time, nor shall anything restrict the right of the County to terminate my employment at any time at the option of the County, subject to the terms of any collective bargaining agreement that may apply to me.

I also understand that if hired, I am required to abide by all rules and regulations of the County. The County's policies and procedures relating to conditions of employment may be modified by the County without notice, subject to the terms of any collective bargaining agreement that may apply to me.

Signature of applicant	Date