

City of Germantown

EMPLOYMENT APPLICATION



THE CITY OF GERMANTOWN IS AN EQUAL OPPORTUNITY DRUG FREE WORKPLACE EMPLOYER

Overview of the hiring and employment process: This application is but one part of the hiring and employment process. Other parts 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 the application or any part of the hiring and employment process, please call the following number: **901-757-7250** or email **HRMAILBOX@germantown-tn.gov**. Prior to completing this application, be sure to read the **JOB DESCRIPTION** of the position for which you are applying.

As you complete the Application, please bear in mind the following: if an item does not apply to you, write N/A; we reserve the right to check all information for accuracy and completeness; all applications for employment are a matter of public record. Any misstatements or omissions of material fact herein may cause any offer of employment made by the City of Germantown to be withdrawn or employment with the City terminated. **Failure to fully complete this application in a legible manner may result in immediate rejection.**

This application will be considered active only until the position for which it has been submitted has been filled. Any applicant wishing to be considered for employment other than the position applied for should inquire as to when applications are being accepted and reapply.

• GENERAL INFORMATION

Date of Application: _____ Position Desired: _____
Application required for each position desired

If hired, on what date can you start working? _____ Can you work on the weekends? Yes No

Can you work evenings? Yes No Are you available to work overtime? Yes No

If hired, would you have transportation to/from work? Yes No

Have you applied with the City Before? Yes No If YES, please give date: _____

Have you been employed by the City Before? Yes No If YES, please complete the following:

Position Held: _____ Department: _____

Length of Service: _____

• PERSONAL INFORMATION

Applicant's Name: _____
Last First Middle

Phone Numbers: Home: _____ Cell: _____ Business: _____

Home Address: _____
Number Street Apt. Number

_____ *City State Zip Code*

Email: _____

PERSONAL INFORMATION cont

Do you have a Legal Right to work in the U.S.? Yes No

Are you over the Age of 18? Yes No

Have you ever been discharged, terminated or forced to resign for misconduct or unsatisfactory service from any job?

Yes No If Yes, Explain in Detail: _____

Are you related to any City Official or Employee? Yes No

If Yes, Please State Name, Department and Relationship: _____

Have you Ever Been Convicted of a Crime? Include Convictions Incurred While in Military Service. (NOTE: THIS MAY BE RELEVANT IF JOB RELATED, BUT DOES NOT NECESSARILY BAR YOU FROM EMPLOYMENT): Yes No If Yes, Please

Describe the Conviction (s), Include Date, Charge, Disposition and Court: _____

Do you possess a valid driver's license? Yes No

For what state? _____ Expiration Date: _____ Class: _____

Is the license you possess a valid Commercial Driver's License (CDL)? Yes No

If yes, please list class: _____ and endorsements: _____

• YOUR EDUCATION AND TRAINING

Circle Highest Grade Completed:

HIGH SCHOOL 9 10 11 12	COLLEGE 1 2 3 4	GRADUATE SCHOOL 1 2 3 4
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SCHOOLS	NAME & LOCATION OF SCHOOL	CHECK IF GRAD	DEGREE OBTAINED	S/Q HRS	MAJOR COURSE WORK
HIGH SCHOOL/GED					
COLLEGE OR UNIVERSITY					
GRADUATE SCHOOL					
VOCATIONAL BUSINESS					
MILITARY SCHOOLS					
OTHER TRAINING					

● **EXPERIENCE**

A RESUME OF YOUR EMPLOYMENT RECORD WILL NOT BE ACCEPTED IN PLACE OF THE REQUESTED EMPLOYMENT INFORMATION.

Starting with your current or last job, list your last three (3) employers since age 18. If your last three (3) employers do not cover a period of ten (10) years, list previous employers including self-employment, military service and volunteer work, to **account for ten (10) years of employment. Use an additional sheet, if necessary.** Account for all periods of unemployment, but if you were unemployed because of medical reasons, do not give any specific information – just state “medical.” A resume may be included as a supplement to the application.

PRESENT OR LAST EMPLOYER _____

Complete Address _____

Phone Number _____ Starting Date _____ Ending Date _____

Starting Salary _____ Ending Salary _____ Hours / Week _____

Supervisor’s Name and Title _____

Your Job Title _____ May we Contact This Employer? Yes No

Brief description of Job Duties: _____

Reason(s) for Leaving: _____

NEXT PREVIOUS EMPLOYER _____

Complete Address _____

Phone Number _____ Starting Date _____ Ending Date _____

Starting Salary _____ Ending Salary _____ Hours / Week _____

Supervisor’s Name and Title _____

Your Job Title _____ May we Contact This Employer? Yes No

Brief description of Job Duties: _____

Reason(s) for Leaving: _____

NEXT PREVIOUS EMPLOYER _____

Complete Address _____

Phone Number _____ Starting Date _____ Ending Date _____

Starting Salary _____ Ending Salary _____ Hours / Week _____

Supervisor’s Name and Title _____

Your Job Title _____ May we Contact This Employer? Yes No

Brief description of Job Duties: _____

Reason(s) for Leaving: _____

List any job related Special Qualifications and Skills (Licenses, Certifications, Skills with Machines, Special Training, etc.):

List Computer Software programs you've had practice with and Number of Years Experience: _____

● **REFERENCES**

Please List Three Responsible Persons (*Other Than Relatives or Former Employers*) Who Have Knowledge of Your Qualifications for Employment.

NAME	ADDRESS	PHONE NUMBER	YEARS KNOWN
1.			
2.			
3.			

● **READ THE FOLLOWING STATEMENT BEFORE SIGNING YOUR APPLICATION:**

I hereby certify that all statements made on this application are true and complete to the best of my knowledge and belief. I understand and agree that any misstatements or omissions of material facts herein may cause an offer of employment made by the City of Germantown to be withdrawn or my employment with the City of Germantown terminated. I further understand that all information provided herein is Public Record and is subject to review upon request.

I authorize the City of Germantown to conduct a thorough investigation of my references and past employment and to conduct background checks consisting of the following: credit, criminal and driver's license, and any other job related certifications. I understand that if an offer of employment is made to me, I may be required to submit to a physical examination and a review of my medical history. Accordingly, I authorize those parties having knowledge of my past (including financial and credit records) to cooperate in this procedure by releasing information as requested. I respectfully request that former employers furnish the necessary information concerning my employment with their organization and I hereby release them from any and all liability for damages for providing information requested.

I do acknowledge and accept that under Tennessee Law any information, with the exception of medical, will become public record upon receipt by the City of Germantown. I hereby waive any rights or claims I may have whether presently fully developed or not, against the City of Germantown or its agents or employees, arising out of, or resulting from the release, authorized or unauthorized, of the information received pursuant to or in connection with the City of Germantown handling, processing, investigation, etc. of my application for employment with the City of Germantown.

I understand that this investigation will be conducted prior to my being given a job offer or within 90 days of employment. If I am hired, I agree to conform to the rules and regulations of the City of Germantown set forth in the City of Germantown's personnel policies & procedures and acknowledge that these rules and regulations may be changed by the City of Germantown at any time, at the City's sole option and without any prior notice to me. I acknowledge that if I am employed, my employment will be at will and may be terminated with or without cause at any time by me or by the City of Germantown. I agree to conform to the City's drug-free workplace policy and agree to submit to drug tests as required by the City of Germantown.

APPLICANT'S SIGNATURE: _____ Date: _____

APPLICATIONS MUST BE SIGNED AND DATED.
UNSIGNED APPLICATIONS WILL RESULT IN IMMEDIATE REJECTION.

City of Germantown

Human Resources Department
1930 South Germantown Road
Germantown, TN 38138
Phone: (901) 757-7250; Fax: (901) 751-7550
HRMAILBOX@germantown-tn.gov



NOTICE TO APPLICANTS

Screening tests for illegal drug use may be required as a condition of employment.