



Application for Employment

Instructions: It is the policy of the City to provide equal opportunity with regard to all terms and conditions of employment. The City complies with federal and state laws prohibiting discrimination on the basis of race, color, religion, sex, national origin, disability, veteran status, age, or any other protected characteristic.

Please Print

Position applied for: Patrol Officer Application Date: _____

Name: _____
LAST FIRST MIDDLE

Address: _____
STREET CITY STATE ZIP CODE

Home Phone: _____ Cellular/Other # _____ E-mail address: _____

Shift preferred 1 2 3 Any Expected pay: _____

Would you accept full-time work? Yes No Would you accept part-time work? Yes No

On what date would you be available for work? _____

How were you referred to our City? _____

Have you ever been employed here? Yes No If yes, please give dates _____

Is this application a request for reemployment following an extended military leave of absence from our City? Yes No
If yes, additional information may be requested.

If you are under 18 years old, can you provide a work permit if required? Yes No

Are you legally eligible for employment in the United States? (If yes, proof is required if hired.) Yes No

Are you able to perform the "essential functions" of the job for which you are applying (with or without reasonable accommodation)? This question is not designed to elicit information about an applicant's disability. Please do not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage, to the extent permitted by law. Yes No Need more information about job's "essential functions" to respond.

Will you travel if required? Yes No

Will you work overtime if required? Yes No

Have you ever been bonded? Yes No

Please provide your driver's license number, if driving is required for this job. _____ State _____

Have you entered into an agreement with any former employer or other party (such as a noncompetition agreement) that might, in any way, restrict your ability to work for our City? Yes No

If yes, please explain: _____

Employment Experience

Place an **X** by the employer(s) you **DO NOT** want us to contact. List your most recent employer first.

Employer: _____
Contact Name: _____ E-mail: _____
Address: _____ Phone: _____
Job Title: _____ Supervisor: _____
Dates employed: from (mm/yy) ___/___ to (mm/yy) ___/___ Hourly rate/salary: starting ___/___ final ___/___
Work Performed: _____
Reason for leaving: _____

Employer: _____
Contact Name: _____ E-mail: _____
Address: _____ Phone: _____
Job Title: _____ Supervisor: _____
Dates employed: from (mm/yy) ___/___ to (mm/yy) ___/___ Hourly rate/salary: starting ___/___ final ___/___
Work Performed: _____
Reason for leaving: _____

Employer: _____
Contact Name: _____ E-mail: _____
Address: _____ Phone: _____
Job Title: _____ Supervisor: _____
Dates employed: from (mm/yy) ___/___ to (mm/yy) ___/___ Hourly rate/salary: starting ___/___ final ___/___
Work Performed: _____
Reason for leaving: _____

Explain any gaps in your employment, other than those due to personal illness, injury or disability.

Have you ever been fired or asked to resign from a job? Yes No

If yes, please explain _____

Education Background

High School: _____ Location: _____

Course of study: _____ Did you graduate? Yes No Degree or diploma _____

College: _____ Location: _____

Course of study: _____ Did you graduate? Yes No Degree or diploma _____

Graduate School: _____ Location: _____

Course of study: _____ Did you graduate? Yes No Degree or diploma _____

Vocation Training/Other: _____ Location: _____

Course of study: _____ Did you graduate? Yes No Degree or diploma _____

Continuing Education: _____

Special Training or Skills

Languages, machine operation, etc., that would be of benefit in the job for which you are applying.

References

List names and telephone numbers of three business/work references who are **not** related to you and are **not** previous supervisors. If applicable, list three school or personal references who are **not** related to you.

NAME	TITLE	RELATIONSHIP TO YOU	TELEPHONE	E-MAIL	YEARS KNOWN

Anti-Discrimination Clause

This City does not tolerate unlawful discrimination or harassment based on sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status under applicable federal, state or local laws. No question on this application is used to limit or exclude an applicant from employment consideration. Harassment of our employees is strictly prohibited, whether it is committed by a manager, coworker, subordinate, or non-employee (such as a vendor or customer). Examples of prohibited harassment include, but are not limited to, unwelcome physical contact, comments, jokes, or epithets, threats, insults, name-calling, offensive gestures, negative stereotyping, possession or display of derogatory pictures or other graphic materials, and any other words or conduct that demean, stigmatize, intimidate, or single out a person because of his/her membership in a protected category. The City takes all complaints of harassment seriously, and each will be investigated promptly and thoroughly.

Applicant Statement

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false or misleading information, omissions or misrepresentations are discovered, my application may be rejected, and if I am employed, my employment may be terminated at any time.

If hired, I agree to conform to the City's rules and regulations, and I understand that these rules and/or the employee handbook do not form a contract of employment either express or implied, and I agree that my employment and compensation can be terminated, with or without cause and with or without notice, at any time, at either my or the City's option.

I also understand and agree that the terms and conditions of my employment may be changed, with or without cause and with or without notice, at any time by the City. I understand that no City representative, other than its City Manager, and then only in writing and signed by the City Manager, has the authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the forgoing.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume, or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees, or representatives for seeking, gathering, and using truthful and nondefamatory information, in a lawful manner, in the employment process and all other persons, corporations, or organizations for furnishing such information about me.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

Applicant's signature _____ **Date:** _____

FOR OFFICE USE ONLY

Applicant number _____ Employee number _____ Hire date _____

Position _____

Rate _____ Class _____ Skill _____

Interview Results			
	Interviewer	Date	

Test Results			
Test Administered	Date	Score	Rating

Reference Checks		
Reference Name	Date Contacted	Contacted By

Attachments: Resume Applicant interview notes Applicant reference notes Test results

**ATHENS POLICE DEPARTMENT
APPLICATION FOR EMPLOYMENT ATTACHMENT
EMPLOYMENT REQUIRMENTS**

- (1) Be at least eighteen (18) years of age;
- (2) Be a citizen of the United States;
- (3) Be a high school graduate or possess equivalence;
- (4) Not have been convicted of or plead guilty to or entered a plea of nolo contendere to any felony charge or to any violation of any federal or state laws or city ordinances relating to force, violence, theft dishonesty, gambling, liquor or controlled substances;
- (5) Not have been released or discharged under any other than honorable discharge from any of the armed forces of the United States;
- (6) Have his fingerprints on file with the Tennessee Bureau of Investigation;
- (7) Have passed a physical examination by a licensed physician;
- (8) Have good moral character as determined by a thorough investigation conducted by the employing agency; and
- (9) Have been certified by a Tennessee Licensed Health Care Provider qualified in the psychiatric or psychological fields as being free from any disorder, as set forth in the current edition of the DSM, that would, in the professional judgment of the examiner, impair the subject's ability to perform any essential function of the job.

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Please attach the following documentation with the submittal of your application:

1. Certificate of Birth
2. U.S. Citizenship (If not born in the United States)
3. High School diploma or equivalent (GED)
4. Military Discharge Certificate
5. Copy of your Driver's License
6. Post Certification Certificate from the Police Academy
7. Social Security Card

Athens Police Department

Consent/Authorization Release Form

Applicant's Legal Name (printed)

Last

First

Middle

Maiden or any other names used in the past

I, _____, do hereby give my consent, and authorize a full disclosure of all records concerning my employment and myself, to any duly authorized agent of the Athens Police Department upon their making a request, whether the said records are public, private, or confidential in nature.

Signature

Date of Birth

Date

Social Security Number

Address

City/State

Contact Number

Witness

Title