STATE OF TENNESSEE
EMPLOYMENT APPLICATION

USE BLACK INK ONLY TO COMPLETE THIS APPLICATION FORM. PLEASE COMPLETE ALL REQUIRED FIELDS OR YOUR APPLICATION WILL BE RETURNED TO YOU.

Please record your Social Security Number below.

List the specific State of Tennessee job titles for which you are applying and the corresponding county preference. Do not use abbreviations as this may result in your application being processed for the incorrect title.

Job Title/Classification	County Preference

PLEASE COMPLETE ALL INFORMATION REQUESTED BELOW. PRINT CAREFULLY TO INSURE THAT YOUR INFORMATION IS ACCURATELY RECORDED INTO YOUR APPLICANT RECORD.

LAST NAME

FIRST NAME

MAILING ADDRESS

CITY ST ZIP CODE

AREA CODE HOME TELEPHONE AREA CODE ALTERNATE PHONE

EMAIL ADDRESS

Have you ever been convicted, forfeited bond, or are you currently on probation for any felony (or any equal offense under military law)? (A felony is defined as an offense punishable by imprisonment for a term of one year or greater.)

REQUIRED ANSWER MUST BE RECORDED HERE → YES ☐ NO ☐

If yes, give details on a separate sheet of paper for each felony offense. Include (1) date, (2) charge, (3) place, (4) court, and (5) action taken. You must disclose any felony conviction involving a sentence or suspended sentence. You may omit: (1) any offense committed before your 18th birthday which was finally adjudicated in a juvenile court; (2) any conviction which has been expunged under federal or state law. A conviction will not necessarily disqualify you from the job for which you are applying. A conviction will be judged on its own merits with respect to time, circumstances, and seriousness.

Please return completed application to:

Tennessee Department of Correction
Attention: Human Resources
320 6th Avenue North
3rd Floor, Rachel Jackson Bldg.
Nashville, TN 37243-0465

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ATTENTION APPLICANTS: DO NOT INCLUDE THIS PAGE WHEN PROVIDING A COPY OF YOUR APPLICATION FOR AN EMPLOYMENT INTERVIEW.

ATTENTION AGENCIES: DO NOT INCLUDE THIS PAGE IF YOU KEEP A COPY OF THIS APPLICATION FOR YOUR RECORDS.

VETERANS PREFERENCE: Tennessee veteran's preference is extended to applicants listed on the appointment or promotional list. To be eligible for veterans preference, you must have received an honorable discharge from the army, navy, air force, marine corps or coast guard or any member of the reserve components, as defined in 10 U.S.C. § 10101, who performs active federal service in the armed forces of the United States. Proof of dates of military service, honorable discharge, disability, death, and residence are required and must be provided to the Department of Human Resources in order to receive Veterans Preference. A spouse or surviving spouse of a veteran is eligible if these conditions are met: as a result of such military services, the veteran suffered a one hundred (100%) percent service-connected disability or is permanently and totally disabled; or the veteran died in the line of duty during such military service; **and** the surviving spouse has not remarried since the death of the veteran.

TO CLAIM VETERANS PREFERENCE, CHECK THE APPROPRIATE BOX BELOW AND SUBMIT PROOF AS INDICATED IN THE TABLE.

Proof will be submitted under separate cover ☐ **Proof is attached** ☐

Proof has previously been submitted to Applicant Services ☐

Date of Entry in Military Service

Month Day Year

Branch of Service:_____

Date of Separation from Active Service

Month Day Year

Rank at Discharge:_____

SPECIAL QUALIFICATION INFORMATION: Employment consideration for some jobs is limited to U.S. citizens and/or to individuals who meet minimum age requirements. If you are applying for a job for which U.S. citizenship or minimum age requirements are applicable, please provide the information in this block.

To be considered for jobs requiring U.S. citizenship, please answer: Are you a U.S. citizen?_____

To be considered for job requiring a minimum age, please answer: Age at time of application:_____

*****OPTIONAL INFORMATION*****

The following information is for Equal Employment Opportunity/Affirmative Action purposes only. To assist the State of TN in its commitment to equal employment opportunity, applicants are asked to voluntarily provide the following information. The State of TN is authorized under federal law to retain this information for research and statistical reasons. This information will not be used in an employment decision and an applicant's failure or refusal to provide this information will not affect an applicant's employment opportunities. Data will be held confidential and only used in accordance with applicable federal law. Refusal to provide information will not subject the applicant to any adverse treatment.

RACE: _____White _____Black _____Hispanic
_____Asian or Pacific Islander _____Native American Indian _____Alaskan Native
_____Other

SEX: Male Female

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EDUCATIONAL BACKGROUND

Please indicate the highest level of primary or secondary education completed.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐ 11 ☐ GED ☐ High School Diploma ☐ Cert. of Completion _____ Date of Completion

POSTSECONDARY EDUCATION – Please list schools attended after high school. This includes any colleges, universities or vocational schools.

Name and City/State of School	Dates Attended To	From	# of hours Completed	Did you Graduate Yes	No	Date of Graduation	Major	Type of Degree

LICENSES: Please list each license, certificate or other authorization to practice a trade or profession. Teachers must specify subject area and type of certification. Please make sure licensure information is current with each new application you submit.

TYPE OF CERTIFICATION	AREA OF ENDORSEMENT	LICENSE NO.	ORIGINAL ISSUE DATE	EXPIRATION DATE	STATE/ISSUING AGENCY

EXPERIENCE BACKGROUND

INSTRUCTIONS: To complete your work history, use the job blocks provided below and on the following pages, beginning with your present or most recent job. If necessary, you may attach additional sheets to provide your complete work history in the format shown below. It is important that you accurately describe the major responsibilities associated with each job you have held. You may submit an employment resume to supplement your application.

Job Title_____ **Employment dates**_____/_____

Hours per week_____ **Starting Salary**_____ **Ending Salary**_____

Employer Name:_____

Employer Address:_____**Phone**_____

Name of Supervisor:_____**# of employees you supervised**_____

Reason for leaving:_____

Duties:_____

_____

_____

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Job Title_____ **Employment dates**_____/_____

Hours per week_____ **Starting Salary**_____ **Ending Salary**_____

Employer Name:_____

Employer Address:_____**Phone**_____

Name of Supervisor:_____ **# of employees you supervised**_____

Reason for leaving:_____

Duties:_____

_____

_____

Job Title_____ **Employment dates**_____/_____

Hours per week_____ **Starting Salary**_____ **Ending Salary**_____

Employer Name:_____

Employer Address:_____**Phone**_____

Name of Supervisor:_____ **# of employees you supervised**_____

Reason for leaving:_____

Duties:_____

_____

_____

Job Title_____ **Employment dates**_____/_____

Hours per week_____ **Starting Salary**_____ **Ending Salary**_____

Employer Name:_____

Employer Address:_____**Phone**_____

Name of Supervisor:_____ **# of employees you supervised**_____

Reason for leaving:_____

Duties:_____

_____

_____

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REFERENCES: Please provide complete information for your references below. Please make sure your reference information is current with each new application you submit.

NAME	ADDRESS	CITY-STATE	PHONE

SIGNATURE:

Under penalty of perjury, I certify that the information I am providing in this application is correct and complete to the best of my knowledge. I am aware that should investigation show any falsification or material misrepresentation, I will not be considered for employment, or if employed, I will be dismissed and disqualified from future consideration. I hereby authorize the State of Tennessee to make all necessary investigations concerning me or my actions and to receive and make available to all state agencies my academic records or other materials pertinent to my qualifications. I further authorize and request each former employer, educational institution, and/or organization (including law enforcement agencies) to provide all information that may be sought in connection with this application.

Signature of Applicant_____**Date**_____

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