

The University of Tennessee

Application for Employment



Please complete a separate applicant for each position.

Date of Application: _____

Position Number and Title:

For HR Use Only

Applicant No. _____

Please check all applicable options: Full Time Part Time Temporary

Date Available: _____

Name: _____
Last First Middle Initial Social Security No.

Mailing Address: _____

Primary Phone No., including Area Code _____
Alternative Phone No., including Area Code _____

Email Address: _____

Other Contact: _____
Name Phone Number, including Area Code
Address

To aid in our verification efforts, list any other names used while employed, e.g., maiden name, legal name changes, etc.: _____

Previous UT or State employee? Yes No If yes, please give dates and department/agency: _____

Previous Federal employee? Yes No If yes, please give dates and department/agency: _____

Relatives working for UT: _____
Name Department Relationship
Name Department Relationship

Please identify how you learned of this position and specify the source below:

- Newspaper
 Personal Referral
 Professional Journal
 Job Fair
 Job Line
 Vacancy List
 Internet
 Employment Security
 UT Employee
 Professional Meeting
 Other

Please specify source: _____

EDUCATION

Name and Location	From Month/Year	To Month/Year	Major/Degree	Did you graduate?
High School/GED:				
Vocational/Technical School :				
College/University:				
Postgraduate:				
Other:				

Honors: _____

Activities: _____

If applicable for the position applied for, note any current certification, license (i.e., driver's license), and/or registration:	_____ _____	Expiration Date: _____ _____
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Skills: List any skills, training, or other qualifications that you feel are applicable to the position for which you applied:

Typing WPM _____
 Dictation WPM _____

Specialized word processing or computer-related skills: _____

Other: _____

Employment: List present or most recent employment first. List all employment experience including military and volunteer service. Show employment history for the past ten years or from the time you left school (if employed less than ten years). You may attach supporting documents (resume, letters of reference, etc.). If you choose to attach a resume, you may use (See Resume) in job title and duties section. This information will be used in reference checks necessary for further consideration. Failure to answer all items in the following section may eliminate you from further consideration. If necessary, please attach a supplemental page for listing additional employment history.

Employment History

Employer	Telephone, including area code	
Address	Salary	
Job Title and Duties	Employed (Month and Year)	FROM TO
Name of Supervisor	Reason for Leaving	
May we Contact: <input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer	Telephone, including area code	
Address	Salary	
Job Title and Duties	Employed (Month and Year)	FROM TO
Name of Supervisor	Reason for Leaving	

Employer	Telephone, including area code	
Address	Salary	
Job Title and Duties	Employed (Month and Year)	FROM TO
Name of Supervisor	Reason for Leaving	

Employer	Telephone, including area code	
Address	Salary	
Job Title and Duties	Employed (Month and Year)	FROM TO
Name of Supervisor	Reason for Leaving	

References: List three individuals, other than relatives, whom we can contact. They should have knowledge of your work experience and/or education (former employers, supervisors, professors, colleagues, etc.).

Name	Mailing Address and Zip Code	Phone Number	Association with You
1.			
2.			
3.			

Certification of Applicant

I certify that all answers to the questions in this application are true, and I further understand that any false statement and/or omission in this application and all other accompanying documentation will be sufficient grounds for rejection of the application or termination of employment. I authorize the University to make any and all necessary and appropriate investigations to verify the information contained herein, including criminal records and work experience background verifications. I also understand prior to employment, I must provide information related to identity and employability. Failure to provide appropriate documentation for verification of employment eligibility (I-9 form) shall result in immediate termination of employment and/or offer of employment.

Signature _____ **Date** _____

The University of Tennessee at Chattanooga does not discriminate on the basis of race, sex, color, religion, national origin, age, handicap, or veteran status in provision of educational opportunities or employment opportunities and benefits. The University does not discriminate on the basis of sex or handicap in the education programs and activities which it operates, pursuant to the requirements of Title VI of the Civil Rights Act of 1964; Title IX of the Education Amendments of 1972, Public Law 92-318; Section 504 of the Rehabilitation Act of 1973, Public Law 93-112; the Americans with Disabilities Act (ADA) of 1990, Public Law 101-336; and the Age Discrimination in Employment Act. This policy extends to both employment by and admission to the university.

Inquiries concerning Title VI, Title IX, Section 504, the Americans with Disabilities Act, and the Age Discrimination in Employment should be directed to the Office of the Director for Affirmative Action, 104 Founders Hall, (423) 425-4124. Charges of violation of the above policy should also be directed to the Office of the Director for Affirmative Action. If you have any questions or if you require accommodations, call the Office of Human Resources (423) 425-4221.

**Equal Employment Opportunity/Affirmative Action Identification
the University of Tennessee at Chattanooga**

Please provide the following information which will be used for Affirmative Action statistics only and will be maintained separately from your employment application:

Position applied for _____ Date _____

Department _____

Name _____ Sex: Male ____ Female ____

Race: Caucasian ____ American Indian or Alaskan Native ____ Black ____ Hispanic ____ Asian or Pacific Islander ____

Optional information:

Disabled: Yes ____ No ____ Specify _____

Vietnam Era Veteran: Yes ____ No ____ Special Disabled Veteran: Yes ____ No ____

From what source did you learn of this position? _____

If by advertisement, please name publication _____

Rev. 9/95

Job Req. No. _____

The University of Tennessee at Chattanooga Disclosure Statement

The University of Tennessee at Chattanooga requires the following information be obtained from each applicant for employment at the University. Any applicant who does not provide the following information will not be considered for employment.

1. Have you ever been convicted of a criminal offense or do you have criminal charges pending against you?

Yes

No

2. Have you ever been dismissed from employment for cause?

Yes

No

If the answer is yes to either question, please give appropriate details.

I hereby certify that the above statements are true to the best of my knowledge.

Date _____

Signature _____

Please print name _____

Information provided on this document does not necessarily disqualify an applicant from employment at The University of Tennessee at Chattanooga.