



NORTH WEST UTILITY DISTRICT
 AN EQUAL OPPORTUNITY EMPLOYER
 APPLICATION FOR EMPLOYMENT

9905 DAYTON PIKE, POST OFFICE BOX 575
 SODDY DAISY, TENNESSEE 37384
 PHONE: (423) 332-2427 APPLY@NWUD.NET

DATE		POSITION APPLYING FOR				
NAME (LAST, FIRST, MIDDLE OR MAIDEN - IF USED ON WORK OR SCHOOL RECORDS)		PHONE NUMBER	DATE AVAILABLE			
STREET ADDRESS		DRIVER LICENSE NUMBER/STATE				
CITY	STATE	ZIP	EMAIL ADDRESS			
HAVE YOU EVER BEEN CONVICTED OF AN OFFENSE AGAINST THE LAW OR ARE YOU NOW UNDER CHARGES FOR ANY OFFENSE AGAINST THE LAW? YOU MAY OMIT ONE TRAFFIC VIOLATION FOR WHICH YOU PAID A FINE OF \$75.00 OR LESS; AND ANY OFFENSE COMMITTED BEFORE YOUR 18TH BIRTHDAY WHICH WAS FINALLY ADJUDICATED IN A JUVENILE COURT UNDER YOUTH OFFENDER LAW. NOTE: A CONVICTION DOES NOT AUTOMATICALLY MEAN YOU CANNOT BE EMPLOYED. WHAT YOU WERE CONVICTED OF AND HOW RECENTLY WILL BE EVALUATED IN RELATION TO THE POSITION FOR WHICH YOU ARE APPLYING. <table style="width: 100%; border: none;"> <tr> <td style="width: 80%;"></td> <td style="text-align: right;">YES</td> <td style="text-align: right;">NO</td> </tr> </table>					YES	NO
	YES	NO				
HAVE YOU EVER BEEN DISCHARGED OR FORCED TO RESIGN FROM EMPLOYMENT? IF YES, PLEASE GIVE DETAILS		YES NO	WILL YOU ACCEPT TEMPORARY WORK? YES NO IF RELATED TO ANYONE IN OUR EMPLOYMENT, PLEASE SPECIFY:			
EMPLOYMENT HISTORY Begin with the most recent employment						
DATES OF EMPLOYMENT FROM TO		COMPANY NAME	ADDRESS			
TITLE OR POSITION HELD		SUPERVISOR NAME	PHONE NUMBER			
REASON FOR WANTING TO LEAVE						
NUMBER OF EMPLOYEES SUPERVISED	SALARY OR EARNINGS STARTING \$ _____ PER HOUR ENDING \$ _____ PER HOUR		MAY WE CONTACT YOUR CURRENT EMPLOYER? YES NO			
DUTIES AND RESPONSIBILITIES						
DATES OF EMPLOYMENT FROM TO		COMPANY NAME	ADDRESS			
TITLE OR POSITION HELD		SUPERVISOR NAME	PHONE NUMBER			
REASON FOR WANTING TO LEAVE						
NUMBER OF EMPLOYEES SUPERVISED	SALARY OR EARNINGS STARTING \$ _____ PER HOUR ENDING \$ _____ PER HOUR		MAY WE CONTACT THIS EMPLOYER? YES NO			
DUTIES AND RESPONSIBILITIES						

EMPLOYMENT HISTORY

DATES OF EMPLOYMENT FROM TO	COMPANY NAME	ADDRESS	
TITLE OR POSITION HELD	SUPERVISOR NAME	PHONE NUMBER	REASON FOR WANTING TO LEAVE
NUMBER OF EMPLOYEES SUPERVISED	SALARY OR EARNINGS STARTING \$ _____ PER HOUR ENDING \$ _____ PER HOUR		MAY WE CONTACT THIS EMPLOYER? YES NO
DUTIES AND RESPONSIBILITIES			

EDUCATION AND TRAINING

CIRCLE HIGHEST GRADE COMPLETED HIGH SCHOOL 9 10 11 12	CIRCLE ONE: DIPLOMA GED N/A	YEAR COMPLETED	HAVE YOU SERVED IN THE U.S. ARMED FORCES?
COLLEGE AND OTHER SCHOOLS (TRADE, VOCATIONAL, MILITARY, BUSINESS, ETC.)	DEGREE OR NAME OF COURSES TAKEN		YEAR COMPLETED

LIST ANY SPECIAL QUALIFICATIONS AND SKILLS (LICENSES, MACHINE EQUIPMENT OPERATOR, COMPUTER SKILLS, ETC.)

REFERENCES

LIST THREE PERSONS WHO ARE NOT RELATED TO YOU AND WHO HAVE KNOWLEDGE OF YOUR QUALIFICATIONS FOR WHICH YOU ARE APPLYING.

DO NOT REPEAT NAMES OF SUPERVISORS LISTED UNDER EMPLOYMENT HISTORY

NAME	BUSINESS OR HOME ADDRESS	OCCUPATION	PHONE NUMBER

I certify that all of the statements made in this application are true, complete and correct, to the best of my knowledge and belief and are made in good faith. I understand that false information may be grounds for rejection of my application, and if employed could be grounds for termination.

SIGNATURE OF APPLICANT:	DATE:
-------------------------	-------