

HIGHLAND RIM HEAD START

P.O. Box 208 • 3215 Hwy 149

Erin, Tennessee 37061

931.289.4135 or 615.763.0273

Fax 931.289.3220



Items to Accompany Employment Application

1. Three letters of Recommendation
2. High School/GED Diploma
3. Secondary education transcripts, diplomas and/or certifications

Highland Rim Economic Corporation
P. O. Box 208
Erin, TN 37061
Phone: 931-289-4101; Fax: 931-289-5311

Application for Employment
(Answer All Questions-Please Print In Black Ink Or Type)

Date _____

Position Applied For _____

Name _____
(Last) (First) (Middle)

Mailing Address _____
(Street And Number)

(City) (State) (Zip)

Physical Address _____
(If Different From Above)

Telephone _____
(Area Code) Home (Area Code) Work

Email Address _____

HREC IS AN EQUAL OPPORTUNITY EMPLOYER

Qualified applicants are considered for positions without regard to race, color, religion, sex, national origin, age, marital status, disability or genetic information.

HREC will only accept applications when positions are available. A new application is required for each position.

Thank you for your interest in employment with us.

Revised July 2014

EDUCATION (Give Complete Educational History Below)

Circle highest school year completed: 1 2 3 4 5 6 7 8 9 10 11 12; College: 1 2 3 4

Last school attended _____
 (Name) (City)

If you did not graduate from high school, do you have a High School Equivalency (GED)? __Yes
 __No

Education Beyond High School	Name and Location of College or University	Years Completed	A.S., B..A., B.S., Etc.	Major Subject
College or University				
Graduate or Professional				
Other Education				

List any special qualifications, foreign languages, skills, or training pertinent to this position.

Please check the computer software you are proficient using:

___Microsoft Word; ___Microsoft Excel; ___Microsoft Publisher; ___Microsoft Power Point

Other software applications you are able to operate: _____

REFERENCES Use three persons who are not related to you and who would have knowledge of your qualifications for the position(s) for which you are applying, such as former co-workers, teachers, etc. Do not repeat names of supervisors listed under employment data. Do not list a current employee of HREC.

Name	Address	Telephone Number

Have you ever been employed by HREC? Yes No

If yes, years employed: _____ Department: _____

Who referred you to us? Employee; Agency _____; Friend;
 Newspaper Ad; Other

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

State _____ License # _____ Class _____ Endorsements _____

List below any relative (first cousin or closer) employed by any department of HREC or serving on the Board of Directors or Policy Council.

Name	Relationship	Position Held

EMPLOYMENT DATA In the space below, give your employment history beginning with your present or most recent employer and list all positions held, including part-time, summer, and significant volunteer work for the last 10 years. Details of unemployment must be included. Experience acquired more than 10 years ago may be summarized in one block if not applicable to the position for which you are applying.

1. Position _____ Name Of Immediate Supervisor _____

Company Name _____

Company Address _____

Company Phone Number _____ May We Contact? Yes No

Employed From _____ Employed To _____

Beginning Salary _____ Ending Salary _____ Hours Per Week _____

Reason For Leaving _____

Description Of Duties And Responsibilities _____

2. Position _____ Name Of Immediate Supervisor _____

Company Name _____

Company Address _____

Company Phone Number _____ May We Contact? ___ Yes ___ No

Employed From _____ Employed To _____

Beginning Salary _____ Ending Salary _____ Hours Per Week _____

Reason For Leaving _____

Description Of Duties And Responsibilities _____

3. Position _____ Name Of Immediate Supervisor _____

Company Name _____

Company Address _____

Company Phone Number _____ May We Contact? ___ Yes ___ No

Employed From _____ Employed To _____

Beginning Salary _____ Ending Salary _____ Hours Per Week _____

Reason For Leaving _____

Description Of Duties And Responsibilities _____

SUPPLEMENTARY DATA

Are you a citizen of the United States? ____ Yes ____ No

If no, please list your alien registration number _____

Have you ever been convicted of an offense against the law? ____ Yes ____ No **(DUIs and DWIs and all other misdemeanors and/or felonies must be included!)** (A conviction record will not necessarily be a bar to employment and factors such as date of the offense, seriousness, and nature of violation will be taken into consideration.)

If yes, give Date, Place, Nature of Offense/Charge and Disposition of Case _____

AUTHORIZATIONS

I authorize Highland Rim Economic Corporation’s investigation of all information contained in this application, or otherwise with regard to me, and I understand that any misrepresentation by me during the application or interview process will result in withdrawal from consideration for employment or my immediate discharge if I am hired, regardless of when discovered. I will indemnify and hold harmless HREC against any liability which might result from making such investigation, and I hereby release HREC, its agents and/or employees, from any liability or damage which may result from the investigation. This authorization shall remain in effect until revoked by me in writing.

I hereby authorize any person or organization whose name I have given as reference, or by whom I have been previously employed, to furnish HREC any information they may have concerning me, and I hereby release all such persons and organizations from any claims for damages.

I hereby authorize investigation of any criminal records, driving records, and financial/credit records.

I agree, if employed, to abide by all the rules and regulations of HREC.

I understand that the completion of the “Application for Employment” does not constitute an offer of employment.

I further understand that if I am employed by HREC this “Application for Employment” will not constitute a contract of employment; employment is at-will.

I certify that the information I have given is true and correct.

Signature _____ Date _____
(Please Sign Full Name)

BUS DRIVER APPLICANTS ONLY

Accident Record For Past 3 Years Or More (Attach Sheet If More Space Is Needed)

Dates	Nature Of Accident (Head On, Rear End, Upset, Etc.)	Fatalities	Injuries
Last Accident _____			
Next Previous _____			
Next Previous _____			

EXPERIENCE AND QUALIFICATIONS – DRIVER

Driver License	State	License No.	Type	Expiration Date
Driver License				
Driver License				
Driver License				

Have you ever been denied a license, permit, or privilege to operate a motor vehicle? ___ Yes ___ No

Has any license, permit, or privilege ever been suspended or revoked? ___ Yes ___ No

If the answer to either of the above questions is Yes, attach statement giving details.

DRIVING EXPERIENCE

Class Equipment	Type Or Equipment (Van, Tank, Flat, Etc.)	Type	Approximate Number of Miles
Straight Truck			
Tractor & Semi-Trailer			
Tractor-Two Trailers			
Other			

Show Special Courses Or Training That Will Help You As A Driver:

Which Safe Driving Awards Do You Hold And From Whom?

EXPERIENCE AND QUALIFICATIONS -- OTHER

Show Any Trucking, Transportation Or Other Experience That May Help In Your Work For This Company.

List Courses And Training Other Than Shown Elsewhere In This Application.

List Special Equipment Or Technical Material You Can Work With (Other Than Those Already Shown).

TO BE READ AND SIGNED BY APPLICANT

This certifies that this application was completed by me and that all entries on it and information in it are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, financial or medical history, and other related matters as may be necessary in arriving at an employment decision. (Generally, inquiries regarding medical history will be made only if and after a conditional offer of employment has been extended.) I hereby release employers, schools, health care providers, and other persons from all liability in responding to inquiries and releasing information in connection with my application. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of HREC.

Applicant's Signature

Date