

**SUPPORT PERSONNEL  
APPLICATION FOR EMPLOYMENT  
CUMBERLAND COUNTY BOARD OF EDUCATION**

The Board of Education considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

*(Please Print)*

Position(s) Applied For	Date of Application
How Did You Learn About Board Employment?	
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative
<input type="checkbox"/> Other	

Last Name	First Name	Middle Name
Address	Number	Street
		City
		State
		Zip Code
Telephone Number(s)		Social Security Number
home: _____		- -
work: _____		

Best time to contact you at home is: \_\_\_\_\_:\_\_\_\_\_ am pm

Have you ever filed an application with the Board before? \_\_\_\_\_Yes  
 No  
 If yes, give date \_\_\_\_\_

Have you ever been employed with the Board before? \_\_\_\_\_Yes \_\_\_\_\_No  
 If yes, give date \_\_\_\_\_

Do you have a family member working for the Board? \_\_\_\_\_Yes \_\_\_\_\_No  
 If yes, state name, relationship, and location \_\_\_\_\_

Are you currently employed? \_\_\_\_\_Yes \_\_\_\_\_No

May we contact your present employer? \_\_\_\_\_Yes \_\_\_\_\_No

Are you prevented from becoming lawfully employed in this country because of  
 Visa or Immigration Status? \_\_\_\_\_Yes \_\_\_\_\_No  
*Proof of citizenship or immigration status will be required upon employment*

Date available for work \_\_\_\_\\_\_\_\_\\_\_\_\_

Are you available to work: \_\_\_\_\_Full time (Please indicate 1<sup>st</sup> or 2<sup>nd</sup> shift)  
 \_\_\_\_\_Part time (Please indicate Mornings or Evenings)  
 \_\_\_\_\_Temporary (Please indicate dates available \_\_\_\_\\_\_\_\_\\_\_\_\_ - \_\_\_\_\\_\_\_\_\\_\_\_\_)

Are you currently on "lay-off" status and subject to recall? \_\_\_\_\_Yes \_\_\_\_\_No

Cumberland County Schools offers educational and employment opportunities without regard to race, color, religion, sex, creed, age, disability, or national origin and provides equal access to the Boy Scouts and other designated youth groups.

Describe any specialized training, apprenticeship, skills and extra –curricular activities.

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Describe any job-related training received in the United States military.

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List professional, trade, business or civic activities and offices held.  
 You may exclude membership, which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.

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**ADDITIONAL INFORMATION**  
 Other Qualifications Summarize special job-related skills, qualifications or licenses acquired from employment or other experience.

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Specialized Skills (Check skills/equipment operated)

<input type="checkbox"/> Commercial Drivers License	<input type="checkbox"/> Spreadsheet	<input type="checkbox"/> Other (list)
<input type="checkbox"/> PC/MAC	<input type="checkbox"/> Word Processing	_____
<input type="checkbox"/> Typewriter WPM_____	<input type="checkbox"/> Shorthand WPM_____	_____

State any additional information you feel may be helpful in considering your application:

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**Note to Applicants:** DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given.  Yes  No

PERSONAL/PROFESSIONAL REFERENCES Do not include family members or past supervisors.			
Name	Phone Number	Best Time to Call	Occupation
1.			
2.			
3.			

## EDUCATION

School	Name and Address of School	Course of Study	Years Completed	Diploma/Degree
High School				
Undergraduate College				
Graduate/Professional				

## WORK EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

<b>Employer</b>	<b>Dates Employed</b> From      To	<b>Work Performed</b>
<b>Address</b>		
<b>Telephone Number(s)</b>	<b>Hourly Rate/Salary</b> Starting      Final	
<b>Supervisor</b>		
<b>Reason for Leaving</b>		

<b>Employer</b>	<b>Dates Employed</b> From      To	<b>Work Performed</b>
<b>Address</b>		
<b>Telephone Number(s)</b>	<b>Hourly Rate/Salary</b> Starting      Final	
<b>Supervisor</b>		
<b>Reason for Leaving</b>		

<b>Employer</b>	<b>Dates Employed</b> From      To	<b>Work Performed</b>
<b>Address</b>		
<b>Telephone Number(s)</b>	<b>Hourly Rate/Salary</b> Starting      Final	
<b>Supervisor</b>		
<b>Reason for Leaving</b>		

**Comments: Include explanation of any gaps in employment.**


## AUTHORIZATION FOR RELEASE OF INFORMATION

Applicant \_\_\_\_\_

Requesting Agency:

Cumberland County Board of Education  
368 Fourth Street  
Crossville, TN 38555

Releasing Agency:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I, the undersigned do hereby authorize the release of the following specific information to authorized Personnel Department employees pursuant to initial or continued employment and other related personnel actions. (Check all required items)

YES    NO

\_\_\_    \_\_\_    Education records, certification and endorsements.

\_\_\_    \_\_\_    Reports of teaching experience.

\_\_\_    \_\_\_    Social History data for purpose of citizenship determination, employment eligibility certification, health and dental coverage.

\_\_\_    \_\_\_    Reference check information related to employment screening.

\_\_\_    \_\_\_    Health, driving records, drug screening results (as required for employment) and criminal background checks (conducted per TCA 49-5-413).

\_\_\_    \_\_\_    Specify \_\_\_\_\_

I understand that no information may be redisclosed by either agency to any other individual or agency without the undersigned written consent. Further, this authorization will be automatically revoked upon termination of employment.

I HAVE READ THE ABOVE AND ASSERT THAT THIS AUTHORIZATION FOR RELEASE OF INFORMATION IS GIVEN FREELY, VOLUNTARILY AND WITHOUT CONCERN.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_

### **Applicant's Statement**

1. I recognize that if I am employed, the Board of Education may assign or reassign me to a specific position, as the need requires.
2. I have not been convicted of a felony in any state of the United States.
3. I have not been dismissed from any previous employment for improper or unprofessional conduct, inefficient service, and neglect of duty, incompetence or insubordination.
4. My resignation from previous employment was, or will be submitted in writing at least ten (10) days prior to the beginning of employment; or, if within ten (10) days, the previous employer has waived its right to such notice.
5. I am a citizen of the United States, or have obtained the proper work credentials.
6. I understand that a post-offer medical examination is a requirement of employment. A decision not to hire based on this examination must be job related and consistent with business necessity and when no reasonable accommodation is available.
7. I understand that misrepresentation of any of the above statements or an unsatisfactory criminal background check (conducted per TCA 49-5-413) may subject me to loss of opportunity for employment and loss of position if employed. Also, that acceptance of an offer of employment does not create a contractual obligation upon the Board of Education to continue employment in the future.
8. This application for employment shall be considered active for a period of time not to exceed 1(one) year.
9. 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, policies, and regulations of the Board.

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Signature of Applicant

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Date

**Return to:**

**Cumberland County Board of Education  
368 Fourth Street  
Crossville, TN 38555**

