



## CITY OF PIGEON FORGE

### APPLICATION FOR EMPLOYMENT

We consider applications for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, sexual orientation, citizenship status, genetic information, or any other legally protected status.

Position(s) Applied for:

Date of Application:

How did you learn about us?

☐ Newspaper

☐ Website

☐ Relative

☐ Friend

☐ Current Employee (name) \_\_\_\_\_

☐ Other \_\_\_\_\_

Last Name:

First Name:

Middle Name:

Address:

*Number*

*Street*

*City*

*State*

*Zip Code*

Telephone Number(s):

Best time to Contact:

E-mail address:

#### Driver's License Information:

Your name as stated on License: \_\_\_\_\_

Drivers License Number \_\_\_\_\_ State: \_\_\_\_\_ Class: \_\_\_\_\_

Endorsement: \_\_\_\_\_ Restrictions: \_\_\_\_\_

Are you 18 years or older?	Yes	No
Have you even been employed with us before? If yes, give date _____	Yes	No
Do any of your friends or relatives work here? If yes, give name/Relationship _____	Yes	No
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? <i>Proof of citizenship or immigration status will be required upon employment.</i>	Yes	No
Date available to work ____/____/____	What is your desired salary range? _____	
Are you available to work:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	

## EDUCATION

	Name and Address of School	Course of Study	Number of Years Completed	Diploma Degree
High School				
College				
Other (Specify)				

Describe any specialized training, apprenticeship, skills, certifications, computer software experience that you have.
If applicable, please describe any military service you have had including any related skill and/or training received.

# EMPLOYMENT 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.

Employer:	Dates Employed		Work Performed:
Address:	From:	To:	
Telephone Number(s):	Hourly Rate/Salary		
Supervisor:	Starting:	Final:	
Job Title:			
Reason for leaving:			

Employer:	Dates Employed		Work Performed:
Address:	From:	To:	
Telephone Number(s):	Hourly Rate/Salary		
Supervisor:	Starting:	Final:	
Job Title:			
Reason for leaving:			

Employer:	Dates Employed		Work Performed:
Address:	From:	To:	
Telephone Number(s):	Hourly Rate/Salary		
Supervisor:	Starting:	Final:	
Job Title:			
Reason for leaving:			

## REFERENCES:

Give the names of three persons not related to you who you have known at least one year as a personal reference. List at least one reference related to past employment.

Name	Address/Phone#	Business	Years Acquainted
1.			
2.			
3.			

## APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

I authorize investigation of all my statements contained in this application for employment as may be necessary in arriving at an employment decision. I also authorize the City of Pigeon Forge to contact my references listed above to complete a reference check before starting employment.

Applicants will be subject to a physical, background check, driving history check and drug testing in accordance with the city policy.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with the City of Pigeon Forge is of an "at will" nature, which means that the Employee can resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of the City of Pigeon Forge.

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 the City of Pigeon Forge.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

*This is an electronic document that allows you to type your information in before printing. You can also print and hand write your information. After completing application, please mail to City of Pigeon Forge, Human Resources Department, P.O. Box 1350, Pigeon Forge, Tennessee 37868-1350 or submit electronically using the button below. All Applications must have a signature of applicant to be valid.*

*City of Pigeon Forge is an Equal Employment Opportunity employer and complies with the ADA and Title VI. Applications are only accepted for open positions. Please be specific on the application for what you are applying for.*

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DO NOT WRITE BELOW THIS LINE

Interviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Position \_\_\_\_\_ Dept \_\_\_\_\_ Hired \_\_Y\_\_N

Hire Date: \_\_\_\_\_ Starting Pay: \_\_\_\_\_

Approvals: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_  
HR Manager Department Head City Manager