Robertson County Emergency Management Agency
1305 Hill St
Springfield, TN 37172
Phone: 615-384-2186
Fax: 615-384-1293

Application for Volunteer Special OPERATIONS

Applications will only be accepted for open, advertised positions.

Robertson County is an equal opportunity employer and considers applicants without regard to race, religion, gender, national origin, age, disability or any other legally protected status.

GENERAL INFORMATION:

First Name:_____ Middle Name:_____Last Name: _____

Street Address_____ City, State, Zip Code:_____

Home Phone: _____Cell Phone _____Email Address:_____

Are you at least 18 years of age? ☐ Yes ☐ No

Do you have the legal right to work in this country? ☐ Yes ☐ No

Proof of employment eligibility will be required upon employment.

Have you ever been convicted of any felonies other than minor traffic violations? ☐ Yes ☐ No

If yes, please explain: _____

A criminal record or a conviction will not automatically bar employment, but will be considered only as it reasonably relates to your fitness to perform in the position for which you are applying.

Have you ever been employed by the Robertson County? ☐ Yes ☐ No
If yes, what position was held? _____ If yes, give date_____

EDUCATION & TRAINING:

High School Attended:_____ City:_____ State:_____
Did you graduate? ☐ Yes ☐ No If not, did you complete a GED? ☐ Yes ☐ No

College / University Trade or Technical School	City and State	Major Area of Study	Degree Earned	Graduate Yes or No

KNOWLEDGE, SKILLS, & ABILITIES

What skills or additional training do you have that relate to the job for which you are applying?

What machines or equipment can you operate that relate to the job for which you are applying?

List all professional certifications you currently hold:

Do you have a valid Tennessee driver's license? ☐ Yes ☐ No Type:_____

Have you ever had your driver's license suspended or revoked? ☐ Yes ☐ No

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CURRENT EMPLOYMENT/ VOLUNTEER HISTORY

List your last four employers, starting with the most recent including military experience. Account for all military service and any periods of unemployment. If self-employed, give name of business.

May we contact your current employer? ☐ Yes ☐ No

Employer:_____ Job Title:_____

Street Address:_____ City, State, Zip Code:_____

Telephone Number:_____ Employed From:_____ ___To: _____

Employer:_____ Job Title:_____

Street Address:_____ City, State, Zip Code: _____

Telephone Number: _____Employed From:_____ ____To:_____

Employer:_____ Job Title:_____

Street Address: _____City, State, Zip Code:_____

Telephone Number:_____ Employed From:_____ To:_____

REFERENCES:

List three professional references not related to you. If not applicable, list three school or personal references not related to you.

Name	Telephone Number	Years Known

AUTHORIZATION / AGREEMENT:

By my signature below, I certify that all of the information and statements provided by me in and with this application are true and correct.

It is understood and agreed upon that any misrepresentation or omission by me in this application will be sufficient cause for cancellation of this application and/or separation from the Robertson County if I have been employed.

I give Robertson County the right to investigate all references and to secure additional information about me. I consent to the release of information to Robertson County about my ability and fitness for employment by employers, schools, law enforcement agencies and other individuals and organizations. I hereby release from liability Robertson County and its representatives for seeking such information and all other persons, corporations or organizations for providing such information.

Signature:_____ Date:_____