

New Life TN, Inc.

702 Hundred Oaks Street
Winchester, TN 37398
931-967-0100
Fax: 931-962-1483



APPLICATION FOR EMPLOYMENT

DATE OF APPLICATION: _____

Name _____
(First) (Middle) (Last)

Address _____
Street, P. O. Box City, State, Zip code

Telephone _____ Education _____
(High School, College, Trade School)

Courses Studied _____ Degree received?

Are you a United States citizen? YES NO If no, are you authorized to work in the U.S. YES NO

Do you have a current driver's license? YES NO "F" endorsement? YES NO

Are you age 21 or older? YES NO Are you now employed? YES NO

Have you ever worked here before? YES NO Dates from: _____ To: _____

Do you have relatives or friends working here? YES NO If yes, Name(s): _____

Can you start to work at once? YES NO If no, reason: _____

For what position are you applying? _____

How did you hear about the job opening? _____

New Life staffs our various departments 24/7/365. Do you have any limits/restrictions to your availability?

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Employment History (Past five years)

Company: _____

Location: _____ Phone: _____

Date Hired: _____ Date Left: _____

Job Title: _____ Ending Salary: _____

Reason for Leaving: _____

Company: _____

Location: _____ Phone: _____

Date Hired: _____ Date Left: _____

Job Title: _____ Ending Salary: _____

Reason for Leaving: _____

Company: _____

Location: _____ Phone: _____

Date Hired: _____ Date Left: _____

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Background Check

VEHICLE INFORMATION SUPPLEMENT TO JOB APPLICATION

The purpose of this supplement is to obtain driver's information on prospective employees of New Life TN. All questions must be answered fully, and the correctness of the information will be checked. Information withheld or incorrectly given, will subject any employee(s) to immediate dismissal.

Name _____ Driver's License Number _____
Any Restrictions on License: _____ Expiration Date _____

Traffic Violations for the Past Four Years, including Driving Under the Influence of alcohol/ drugs/ reckless driving, etc.:

Number of Accidents in the Last Four Years:

HAVE YOU BEEN CONVICTED OF A CRIME IN THE LAST TEN (10) YEARS Yes ___ No ___

If yes, complete the following:

Date and type of offense: _____

Location: _____

Disposition of Case: _____

Conviction will not necessarily be a bar to employment, each instance will be considered in relation to the position for which you are applying.

APPLICANT: READ AND SIGN BEFORE SUBMITTING THIS APPLICATION

I, the undersigned applicant, certify and affirm that, to the best of my knowledge and belief; I have or have not (as applicable, circle one) had a case of abuse, neglect, mistreatment or exploitation substantiated against me. As a condition of submitting this application, and in order to verify this affirmation, I further release and authorize New Life TN and the Tennessee Department of Intellectual and Developmental Disabilities to have full and complete access to any and all current or prior personnel or investigative records from any party, person, business, or agency, as pertains to any allegations against me of abuse, neglect or mistreatment, and to consider this information as may be deemed appropriate.

I further certify that the information contained in this application is truthful to the best of my knowledge. I understand that a background check will be conducted by an independent agency.

I understand terms of employment include my submitting to a drug and alcohol test. I agree to submit to a drug and alcohol test.

I give authorization to verify all information on this application.

Signature of Applicant

Date

Applicants are considered for all positions without regard to race, color, religions, sex, national origin, age, marital or veteran status, or the presence of a non-job-related medical condition or handicap.