



# CITY OF NEWPORT

300 E Main Street  
Newport, TN 37821

## APPLICATION FOR EMPLOYMENT

***Incomplete or illegible applications will not be accepted.  
Application must be filled out completely.***

TITLE OF POSITION APPLYING FOR			
APPLICANT'S NAME (LAST)		(FIRST)	(MIDDLE)
ADDRESS (STREET & MAILING)		(CITY)	(STATE) (ZIP)
CELLULAR PHONE # ( )	HOME TELEPHONE # ( )	DO YOU PRESENTLY POSSESS A VALID TENNESSEE DRIVER'S LICENSE? <input type="checkbox"/> YES <input type="checkbox"/> NO	
E-MAIL ADDRESS:		LICENSE #:	CLASS: EXPIRATION: / /
LIST ANY OTHER NAMES USED:		HAVE YOU EVER WORKED FOR THE CITY OF NEWPORT? <input type="checkbox"/> YES <input type="checkbox"/> NO	
ARE YOU A U.S. CITIZEN? <input type="checkbox"/> YES <input type="checkbox"/> NO		DO YOU HAVE ANY RELATIVE(S) CURRENTLY EMPLOYED BY THE CITY OF NEWPORT? <input type="checkbox"/> YES <input type="checkbox"/> NO	
SOCIAL SECURITY NUMBER _____		NAME _____	
IF NATURALIZED, DATE OF CITIZENSHIP AND COUNTRY OF BIRTH:		RELATIONSHIP _____	
IF NO, TYPE OF VISA AND EXPIRATION DATE:			
ALIEN REGISTRATION#			
THE CITY OF NEWPORT COMPLIES WITH THE AMERICANS WITH DISABILITIES ACT. ARE THERE ANY REASONS YOU MAY HAVE DIFFICULTY PERFORMING ANY OF THE MAJOR DUTIES OF THE JOB FOR WHICH YOU HAVE APPLIED? <input type="checkbox"/> YES <input type="checkbox"/> NO			
IF SO, PLEASE EXPLAIN:			
IF APPLICABLE TO THE POSITION WHICH YOU ARE SEEKING, INDICATE OTHER SKILLS SUCH AS MACHINERY SKILL, TYPING SPEED, BUSINESS MACHINES, COMPUTER HARDWARE OR SOFTWARE THAT YOU OPERATE, ETC.			
BILINGUAL LANGUAGE SKILLS:			
LANGUAGE: <input type="checkbox"/> SPEAK <input type="checkbox"/> WRITE <input type="checkbox"/> TRANSLATE			

**AN EQUAL OPPORTUNITY EMPLOYER**



NAME OF EMPLOYER	TYPE OF BUSINESS	
ADDRESS	NO. OF PERSONS YOU SUPERVISED	NAME AND TITLE OF SUPERVISOR
TELEPHONE NUMBER	MAY WE CONTACT NOW? <input type="checkbox"/> YES <input type="checkbox"/> NO	REASON FOR LEAVING
DATES EMPLOYED	BRIEF DESCRIPTION OF DUTIES	
JOB TITLE		
NAME OF EMPLOYER	TYPE OF BUSINESS	
ADDRESS	NO. OF PERSONS YOU SUPERVISED	NAME AND TITLE OF SUPERVISOR
TELEPHONE NUMBER	MAY WE CONTACT NOW? <input type="checkbox"/> YES <input type="checkbox"/> NO	REASON FOR LEAVING
DATES EMPLOYED	BRIEF DESCRIPTION OF DUTIES	
JOB TITLE		
NAME OF EMPLOYER	TYPE OF BUSINESS	
ADDRESS	NO. OF PERSONS YOU SUPERVISED	NAME AND TITLE OF SUPERVISOR
TELEPHONE NUMBER	MAY WE CONTACT NOW? <input type="checkbox"/> YES <input type="checkbox"/> NO	REASON FOR LEAVING
DATES EMPLOYED	BRIEF DESCRIPTION OF DUTIES	
JOB TITLE		
ADDITIONAL WORK HISTORY SPACE ON THE BACK OF THIS SHEET		

1. I hereby certify that all statements made in this application are true and complete, and any misstatements, omissions, or falsifications of material facts **will be cause** for a disqualification of employment and/or my immediate termination of my employment with the City of Newport.
2. I understand that employment is contingent upon successful completion of a job related physical examination, background check and I agree to be drug tested.
3. I authorize the release of any information necessary to verify the statements made in this application to the City of Newport or its duly authorized agents.
4. I understand that employment is contingent upon my providing verification of my identity and legal right to work in the U.S.
5. I understand that in order for me to be considered for employment by the City of Newport I must submit to a pre-employment Drug Screening that consists of a urine test to determine the presence of illegal drugs and substances. I will be asked to submit to this test after a contingent offer of employment has been extended to me. I understand that if the results of these tests are positive, the City of Newport will withdraw the contingent offer of employment and I will not be considered further for employment.

DATE \_\_\_\_\_ SIGNATURE OF APPLICANT \_\_\_\_\_

**AN EQUAL OPPORTUNITY EMPLOYER**

POSITION FOR WHICH YOU APPLIED:

The information requested below will be used for statistical and reporting purposes only. It will enable the City of Newport to more effectively evaluate the recruitment process in compliance with Equal Opportunity Employment laws and to determine if there is any adverse impact in the selection process on groups protected under federal and state equal opportunity laws. This information is requested on a voluntary basis and will not be made a part of the selection process. If you have any questions regarding this request, please contact the City of Newport. Thank you for your assistance.

- MALE
- FEMALE
- I DO NOT WISH TO IDENTIFY

DATE OF BIRTH: \_\_\_\_\_

RACE/ETHNIC CATEGORY:

- HISPANIC OR LATINO:** All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
- WHITE (Not Hispanic or Latino):** All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- BLACK OR AFRICAN AMERICAN (Not Hispanic or Latino):** All persons having origins in the black racial groups of Africa.
- AMERICAN INDIAN OR ALASKAN NATIVE (Hispanic or Latino):** All persons having origins in any of the original peoples of North and South America (Including Central America), and who maintain cultural identification through tribal affiliation or community recognition.
- ASIAN OR PACIFIC ISLANDER:** All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa
- TWO OR MORE RACES (Not Hispanic or Latino):** All persons who identify with more than one of the above five races
- I DO NOT WISH TO SELF-IDENTIFY**

ABLE-DISABLED CATEGORY:

If you have a disability that would interfere with you performing the job for which you are applying, please indicate. All information is voluntary, and will be kept confidential.

- HEARING IMPAIRMENT
- VISUAL IMPAIRMENT
- ORTHOPEDIC DISABILITY
- MENTAL/EMOTIONAL DISORDER
- MEDICAL CONDITION
- OTHER

JOB SOURCE INFORMATION:

Please indicate where you learned about this job vacancy:

- Facebook or other social media source
- Newspaper (please specify)
- Job flyer posted at another agency
- State employment office
- Radio (please specify)
- College placement service (please specify)
- Jobs available
- Friend or relative
- Other (please specify)

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**Please contact the Human Resources if you require special accommodations during any of the hiring process.**

**City of Newport  
300 E Main Street  
Newport, TN 37821  
(423) 623-7323**