

MID-EAST COMMUNITY ACTION AGENCY

PO Box 790
315 East Race Street
Kingston, Tennessee 37763

Roane / Loudon Counties

Phone: 865.248.8661

Fax: 865.248.8664

EQUAL OPPORTUNITY EMPLOYER EMPLOYMENT APPLICATION

1. Title of position applied for: _____ Date _____
2. Name
Last _____ First _____ Middle _____
3. Present Address _____
Street _____

City State Zip Code
4. Social Security Number _____
5. Telephone Number _____
Home Business Cell
6. E-mail Address _____
7. An affirmative response to the following will not necessarily be a bar to employment. Factors such as age, elapsed time, seriousness, nature and rehabilitation will be taken into account.

Have you ever been convicted for a violation of the law other than a minor traffic violation in the past seven years? Yes _____ No _____

If yes, please explain:

8. Will you accept temporary employment for six months or less? Yes _____ No _____
9. Will you accept part-time employment? Yes _____ No _____
10. In which counties will you accept employment? Loudon _____ Roane _____

11. Circle the highest grade completed.

1 2 3 4 5 6 7 8 9 10 11 12 G E D _____
Other (college)

12. List all relevant education and training beginning with High School:

School Name and Address	Major	Minor	Degree

13. Are you licensed to practice any profession? Yes _____ No _____

Profession license # by Date

14. Do you have a valid Tennessee driver's license? Yes _____ No _____

Do you have an F endorsement? Yes _____ No _____

Do you have a CDL with endorsement to transport children? Yes _____ No _____

Do you have a vehicle available for your work? Yes _____ No _____

Do you have the minimum auto insurance coverage specified by the State of Tennessee?

Yes _____ No _____

Have you ever been refused fidelity bond coverage? Yes _____ No _____

Has your driver's license ever been revoked or suspended? Yes _____ No _____

If yes, please give dates and list details _____

15. Please list any special skills or abilities that relate to the position you have applied for:

16. Please list any community or volunteer organizations/work that you are or have been involved in:

17. It is important for you to furnish a sufficiently detailed statement of your employment history including military history. Consideration for employment and evaluation of education is based solely upon information in this section. List employment history beginning with your present or most recent employer. Accurate telephone information is required.

Employer_____ Dates_____

Address_____ Telephone_____

Position_____ Supervisor_____

Duties of your position_____

Rate of Pay_____ Reason for Leaving_____

Employer_____ Dates_____

Address_____ Telephone_____

Position_____ Supervisor_____

Duties of your position_____

Rate of Pay_____ Reason for Leaving_____

Employer_____ Dates_____

Address_____ Telephone_____

Position_____ Supervisor_____

Duties of your position_____

Rate of Pay_____ Reason for Leaving_____

Employer _____ Dates _____

Address _____ Telephone _____

Position _____ Supervisor _____

Duties of your position _____

Rate of Pay _____ Reason for Leaving _____

18. Please indicate if any of the above listed supervisors should not be contacted.

19. Please list four references other than relatives or supervisors listed above. Please do **not** list Mid-East Community Action Agency employees as personal references. Accurate and sufficient telephone numbers are required.

Name _____ Telephone _____

Name _____ Telephone _____

Name _____ Telephone _____

Name _____ Telephone _____

20. Are any members of your immediate family or household presently employed with our agency or a member of our Board of Directors?

___ Yes ___ No If yes, please list _____

APPLICANT CERTIFICATION

Employment application information is verified before any applicant is hired. Any application that does not have the necessary information will not be considered. This includes correct contact information. Therefore, the applicant should check for completeness before submitting an application for review. If information in this application is found to be false or intentionally omitted, adverse employment action, including termination, may occur. This completed application is not a contract or guarantee of employment.

I authorize a criminal background check if deemed necessary by Mid-East Community Action Agency (MECAA). I agree to conform to the rules and regulations of MECAA set forth in the Personnel Policies and Procedures Manual and acknowledge that these may be changed, withdrawn, or added to by MECAA at any time at MECAA's sole option without prior notice to me.

MECAA is a alcohol/drug free agency and I will consent to a alcohol/drug screening test, either prior to employment, during my introductory period, or at any subsequent time as deemed necessary by MECAA.

I understand English is the primary language skill, however, bilingual skills may be required based on agency necessity and placement.

If employed, I will adhere to the Dress Code Policy at all times as set forth in the Personnel Policies and Procedures Manual.

I understand that MECAA is a smoke free agency and if employed will adhere to the Smoke/Tobacco Free Environment Policy as set forth in the Personnel Policies and Procedures Manual.

After employment is offered, I may be required to obtain a physical /medical examination and tuberculosis test for my particular position to see if I meet the physical qualifications.

I acknowledge that if employed by MECAA, it will be on an *employment-at-will* basis. My employment is subject to termination with or without notice and with or without cause at any time by either me or MECAA.

I certify that the information in this application is accurate and complete and authorize you to verify qualifications, references and related information furnished herein. I further certify that, if hired, I am lawfully eligible to work in the United States.

Print Name

Signature

Date

**MID-EAST COMMUNITY ACTION AGENCY IS AN
EQUAL OPPORTUNITY EMPLOYER**

Mid-East Community Action Agency offers employment to qualified persons regardless of race, color, religion, ethnic or national origin, age, personal handicap or sex. These policies are in compliance with the requirements of Titles VI & VII of the Civil Rights Amendments of 1972, the Rehabilitation Act of 1973, the Americans With Disabilities Act of 1990, and all other applicable federal, state and local statutes, ordinances and regulations. Reasonable accommodations will be made for applicants with disabilities.

**EQUAL EMPLOYMENT OPPORTUNITY DATA FORM
(Voluntary Response Form)**

Your response to the following questions is voluntary and is requested for the singular purpose of insuring our ability to comply with Federal Equal Employment Opportunity legislation and to meet our affirmative action obligations as a federal contractor. Your response will be kept confidential. Although refusal to provide this information will not result in adverse treatment, your cooperation is appreciated.

_____ Name

_____ Social Security Number

Are you 18 years of age or older? Yes _____ No _____

Ethnicity:

_____ Hispanic, Latino, or Spanish origin

_____ Non-Hispanic, Latino, or Spanish origin

Race:

_____ White

_____ Black or African American

_____ American Indian and Alaska Native

_____ Asian

_____ Native Hawaiian and other Pacific Islander

_____ Other

_____ Multi Race (2 or more of the above)

**MID-EAST COMMUNITY ACTION AGENCY IS AN
EQUAL OPPORTUNITY EMPLOYER**

Mid-East Community Action Agency offers employment to qualified persons regardless of race, color, religion, ethnic or national origin, age, personal handicap or sex. These policies are in compliance with the requirements of Titles VI & VII of the Civil Rights Amendments of 1972, the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990, and all other applicable federal, state and local statutes, ordinances and regulations. Reasonable accommodations will be made for applicants with disabilities.