

GALLATIN DEPARTMENT OF ELECTRICITY (GDE) APPLICATION FOR EMPLOYMENT

135 Jones St. Gallatin, TN 37066 615-452-5152 – O 615-452-6060 – F

Position desired: 1st	2 nd	Wage l	Expected:		
Name:	SSN:				
Cell phone:	Home phone: Email:				
Address:					
Are you currently dating or roman	nmodations? NO ent in the U.S.? YES NO ily members employed wintically involved with a GI	If necessary for the job, I am able to: Work Overtime?			
	EMPLOYM	MENT HISTORY			
job are listed here. If additional exp Employer name and address:	Position title/duties, skills:		Start date:		
Starting Salary: \$	Supervisor:	Phone #			
Ending Salary: \$	D '' '' '' '	•11	Gr. A. I. A.	T. 1.1.4	
Employer name and address:	Position title/duties, sk	ills:	Start date:	End date:	
			Reason for lo	eaving:	
Starting Salary: \$	Supervisor:	Phone #			
Ending Salary: \$					
Employer name and address:	Position title/duties, sk	ills:	Start date:	End date:	
			Reason for lo	Leaving:	
Starting Salary: \$	Supervisor:	Phone #			
Ending Salary: \$				·	

EDUCATION

	Institution Name	City/State	Year Completed	From	То	Graduate/ Degree	Year Awarded
High School							
College/University							
Business/Technical							
Additional							

	SKIL	LS & QUALIFICATI	IONS				
Other qualification such as special skills, abilities or honors that should be considered:							
Types of computers, software and other equipment you are qualified to operate:							
Professional licenses, co	ertifications or registration	ns:					
Additional skills, includito bring to the employe		r languages or informa	tion regarding the career/o	occupation you wish			
		REFERENCES					
List two personal references who are not relatives or former supervisors:							
Name	Address	FIIOTIE	Occupation	rears known			
Name	Address	Phone	Occupation	Years Known			
	INFORM	ATION TO THE API	PLICANT				
understand that any falsification		material fact may be grounds fo	ent and in no way guarantees me a joor disqualification of this application owithout cause.				
necessary by GDE at its expense.	. I authorize GDE to accomplish wha	atever background investigation	edical examination and psychological is deemed necessary, authorize all publity for any and all damage whatso	parties to furnish GDE with any			
manufacture, distribution, dispe premises. It is also against our of substances. As part of our pre-e	ensation, possession or use of alcoholisciplinary rules to report to work	ol or illegal controlled substance with impaired ability as the re we require that prospective emp	Orug-Free Workplace Act of 1988. Ou ses on GDE's premises or while cond sult of, or signs of recent prior use ployees undergo a sophisticated and	ucting GDE business off GDE's of alcohol or illegal controlled			
discriminate against individuals of		orientation, gender identity, religion	ntory employment environment for i gion, color, national or ethnic origin, a				
Signature of Applicant			Date				