

**SHELBY COUNTY SCHOOLS
HR TECHNOLOGY SUPPORT SPECIALIST
APPLICATION**

Current Shelby County Schools employees must submit the attached form. All other applicants must complete the attached form and submit a regular employment application available on the last 2 pages of this document.

Name: _____ Phone: _____

Address: _____ Cell Phone: _____

Email Address: _____

Current Position

School or Employer: _____

Assignment: _____

Certificates or Degree: _____

Do you hold a Tennessee Administrative Endorsement? _____

Work Experience

List below all relevant experience.

Year	School & System or Employer	Assignment
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Return completed application to:
Human Resources-Room 106
Shelby County Schools
160 S. Hollywood
Memphis, TN 38112**

**SUPPORT PERSONNEL
SHELBY COUNTY SCHOOLS
160 S. HOLLYWOOD ST. MEMPHIS, TENNESSEE 38112
(901) 321-2537
APPLICATION FOR EMPLOYMENT**

Position(s) Desired: _____ Date of Application _____ month _____ day _____ year

1. _____ School Area(s) Desired 1. _____
2. _____ 2. _____

Name _____ Social Security Number _____
(Last) (First) (Middle/Maiden)

Local Address: _____ Street _____ Phone _____
_____ City _____ State _____ Zip _____

Residence Requirement: All new employees of Shelby County Schools must reside in Shelby County.

I. PERSONAL DATA

A. Military Service: Branch _____ Length _____ Dates _____ From _____ To _____

B. Do you have any relatives presently employed by Shelby County Schools? Yes No

If yes, please list. _____
Name Relationship

Name Relationship

C. Have you ever been convicted of a misdemeanor or felony including dispositions of such as probation or diversion in any state? Yes No If yes, please explain below. This will not necessarily cause ineligibility.

My signature below authorizes Shelby County Schools to conduct a background investigation and authorizes release of information in connection with my application for employment. This investigation may include a criminal history records check conducted by the Tennessee Bureau of Investigation pursuant to Tennessee code Annotated Sec. 49-5-413 as well as previous employers and educational institutions, personal references, and other appropriate sources. I waive my right of access to any such information, and without limitation hereby release Shelby County Schools and the reference source from any liability in connection with its release or use.

Furthermore, I certify that I have made true, correct, and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application. I understand that any omission or false answer or statement on the application or any supplement to it will be sufficient grounds for failure to employ or for my discharge should I become employed with Shelby County Schools.

Knowingly falsifying information required by Sec. 49-5-406(a)(1) shall be sufficient grounds for termination of employment and shall also constitute a Class A misdemeanor which must be reported to the District Attorney General for prosecution.

Date _____ Signature of applicant _____

Application must be complete before consideration for employment will be made. This application will remain on file for two years.
Please continue on the other side.

MARK THE APPROPRIATE BOXES

- New Application
- Previous Application on File
- Former Employee of Shelby County Schools

Are you eligible to work in the U.S.?

- Yes
- No

PLEASE INDICATE SKILLS FOR THE POSITION DESIRED

Typing _____ w.p.m.

Shorthand _____ w.p.m.

Computer Skills Yes No (If yes, give details below)

Other _____

List any degree/certification/license for the position desired. _____

II. EDUCATION

	Name/Location of School	Major Area of Study	Degree/Diploma/Certificate
Elementary			
High School			
College			
Trade/Business School			

III. PERSONAL REFERENCES

Please indicate information where they can be contacted. (DO NOT LIST RELATIVES)

Name	Phone	Street	City	State	Zip

IV. WORK EXPERIENCE

Do you want your present employer contacted?

- Yes
- No

(Begin with most recent experience)

Name and Address of Employer	Position	Dates Employed Mo/Yr. Mo/Yr.	Reason for Leaving
		To	
		To	
		To	

ATTACH AN ADDITIONAL SHEET IF NECESSARY

Are you seeking 10 month or 12 month employment? Are you available for substitute work? Yes No

Shelby County Schools does not discriminate on the basis of race, color, national origin, age, religion, political affiliation, disability, or sex in its employment. No person shall be denied employment solely because of any impairment which is unrelated to the ability to engage in activities involved in the position for which the application has been made.