



KNOX COUNTY DISTRICT ATTORNEY GENERAL ATTORNEY APPLICATION



Full Name:	Law School & Grad Date:
	Bar Admissions:

Street Address

City, State, Zip

Phone Number

Email

INSTRUCTIONS

Type or print in ink this application in its entirety
 Specify the position for which you are applying
 Sign your name in the Certification Section
 All information you submit is subject to verification
 Notify if requiring special accommodations for this process

Eligible to Work in USA: Y: ___ N: ___

Require H-1B Y: ___ N: ___

Tennessee Resident: Y: ___ N: ___

Veteran or Active Service: Y: ___ N: ___

Current Student: Y: ___ N: ___

Previous State Employee: Y: ___ N: ___

Previous County Employee: Y: ___ N: ___

Schools Attended	Name and Location of School	Degree	Major/Minor
High School			
College or University			
College or University			
College or University			

Special Qualifications
 List active professional and technical licenses, certifications, and academic/professional awards

License, Certification, or Award	Field, Specialization, or Nature of Award	School or Organization

Criminal Law Specializations

Title	Description



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Current or Most Recent *Legal Position*

Business Name		Supervisor's Name	
Business Location		Supervisor's Phone Number	
Full Time or Part Time		Date Started (Month/Year)	
Regular, Contract, or Temp.		Date Ended (Month/Year)	
Your Job/Working Title		Paid/Unpaid	Hours/Week
May We Contact Employer?			
Description of Job Duties (Below)		Reason for Leaving	

Former *Legal Position*

Business Name		Supervisor's Name	
Business Location		Supervisor's Phone Number	
Full Time or Part Time		Date Started (Month/Year)	
Regular, Contract, or Temp.		Date Ended (Month/Year)	
Your Job/Working Title		Paid/Unpaid	Hours/Week
May We Contact Employer?			
Description of Job Duties (Below)		Reason for Leaving	

References:

Name _____ / Relationship _____ / Contact _____

Name _____ / Relationship _____ / Contact _____

Name _____ / Relationship _____ / Contact _____

I hereby certify that all information provided by me on this application is ACCURATE AND COMPLETE to the best of my knowledge. I understand that any false or incomplete information furnished by me, or failure to disclose requested information, may result in the rejection of this application, may make me no longer eligible for consideration for employment or may result in my dismissal after my employment. I authorize the this office to investigate any statement contained in this employment application and release former employers and reference contacts from any and all liability on account of furnishing such information to this office. I further understand that, if considered for this position, this office will conduct criminal and/or driving record checks. I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between this office and myself. I hereby release the Knox County District Attorney General Office from any/all liability of whatever kind and nature which, at any time, could result in obtaining and having an employment decision based on such information. I volunteer for drug testing as a part of the application process. Failure to submit to a drug test will disqualify me. I understand that the Office may investigate my criminal and/or driving history, and may use such information against me as called upon by ethical obligations.

SIGNATURE _____

DATE _____



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I authorize the Knox County District Attorney General's Office to conduct a background check on behalf of my application for employment. I understand that consumer reports or investigative consumer reports may be requested about me including information about my character, general reputation, personal characteristics, and mode of living which may include internet searches for determination of my eligibility to occupy a position of trust, as well as personal reference interviews, employment records, education qualifications, criminal records, driving records, credentials, and/or credit and indebtedness.

Print / Sign / Date

References:

Name _____ / Relationship _____ / Email _____

Name _____ / Relationship _____ / Email _____

Name _____ / Relationship _____ / Email _____