

WORK EXPERIENCE:

<u>Position</u>	<u>Name of Firm or Institution</u>	<u>Dates</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

REFERENCES:

Give the names and addresses of three persons acquainted with your academic work and/or with you as an employee.

<u>NAME</u>	<u>ADDRESS</u>	<u>TELEPHONE NO.</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

The Public Acts of 1969, Chapter 130, State of Tennessee, requires that the following information be obtained from each applicant for employment:

Have you ever been convicted for the violation of a criminal law? YES___ NO___

Have you ever been dismissed from employment for any reason? YES___ NO___

If either is YES, please attach a sheet giving full and appropriate details.

All statements made in the application are true, complete and correct. I understand that any misrepresentation or omission of information shall be considered sufficient reason for withdrawal of an offer or subsequent dismissal if employed.

SIGNATURE: _____ DATE _____

PLEASE RETURN THIS FORM TO:

Dr. Don Hodges
Graduate Program Coordinator
Department of Forestry, Wildlife & Fisheries
The University of Tennessee
2431 Joe Johnson Drive, Room 274 Ellington Plant Sci. Bldg
Knoxville, TN 37996-4563
Phone: (865) 974-7126 Fax: (865) 974-4714

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