

UNITED ELECTRIC CO-OP, INC.

Application for Employment An Equal Opportunity Employer

Each question should be fully and accurately answered. No action can be taken on this application until all questions have been answered. Use blank paper if you do not have enough room on this application blank. **PLEASE PRINT**, except for signature on back of Application. All information given will be available only to persons who have a "need to know" or as required by law. This company will make reasonable accommodation in the application process, if needed.

PERSONAL INFORMATION (Please print)

Name	Last	First	Middle Initial	Date
U.S. Applicant Only:				
Are you legally eligible for employment in the U.S.? (Circle One) Yes No <i>All new hires will be required to provide proof of eligibility to work in the U.S.</i>				
Have you ever been convicted of a criminal offense? Yes___ No___ (A conviction will not necessarily disqualify an applicant.) If yes, please explain: _____				
Are you over 18 years of age? Yes___ No___				
Present Address	Street		Apt	
City	State		Zip Code	
Phone Number	Day	Evening		Referred By

EMPLOYMENT DESIRED

Position	Date you can Start	Salary Desired
Are You Currently Employed?	Yes No	May we contact your current employer? Yes No
Which type of Employment are you seeking: Full-Time_____ Part-time_____ Temporary or Summer_____		

EDUCATION HISTORY

Level	Name & Location of School	Years Attended	Graduate (Y/N)	Area of Study
High School				
College				
Other job-related education				
List skills relevant to the position applied for: 				
Do you have a valid driver's license? Yes No License Number and State Issued _____				
If you are an experienced operator of any business/plant machines or equipment, please list: 				
Computer Proficiency: <input type="checkbox"/> Microsoft Word <input type="checkbox"/> Microsoft Excel <input type="checkbox"/> Other (List)				

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RECORD OF EMPLOYMENT

1. Name of Current/Most Recent Employer				Address		Telephone		Type of Business	
Dates Employed			Rate of Pay		Reason for Leaving			Supervisor's Name and Title	
From		To	Starting	Ending					
Mo.	Yr.	Mo.	Yr.						
List the jobs you held, duties performed, skills used or learned, advancements or promotions.									

2. Name of Next Previous Employer				Address		Telephone		Type of Business	
Dates Employed			Rate of Pay		Reason for Leaving			Supervisor's Name and Title	
From		To	Starting	Ending					
Mo.	Yr.	Mo.	Yr.						
List the jobs you held, duties performed, skills used or learned, advancements or promotions.									

3. Name of Next Previous Employer				Address		Telephone		Type of Business	
Dates Employed			Rate of Pay		Reason for Leaving			Supervisor's Name and Title	
From		To	Starting	Ending					
Mo.	Yr.	Mo.	Yr.						
List the jobs you held, duties performed, skills used or learned, advancements or promotions.									

4. Name of Next Previous Employer				Address		Telephone		Type of Business	
Dates Employed			Rate of Pay		Reason for Leaving			Supervisor's Name and Title	
From		To	Starting	Ending					
Mo.	Yr.	Mo.	Yr.						
List the jobs you held, duties performed, skills used or learned, advancements or promotions.									

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PROFESSIONAL REFERENCES (Give below the names of three (3) professional references, who you have known for at least one year)

Name	Address	Phone	Business	Years Known
Name	Address	Phone	Business	Years Known
Name	Address	Phone	Business	Years Known

PERSONAL REFERENCES (Give below the names of three (3) personal references, who you have known for at least one year)

Name	Address	Phone	Business	Years Known
Name	Address	Phone	Business	Years Known
Name	Address	Phone	Business	Years Known

AUTHORIZATION

This Employment Application is used to notify me that the nature and scope of an investigation, if one is conducted, could include such general identification information as residence verification, and, as applicable, information concerning my employment, education, general reputation, character, personal characteristics, and habits, and that such information may be developed through personal interviews with third parties such as family members, neighbors, friends, associates, former employers, educational institutions, custodians of official records or other sources. Only job-related information developed from such a report will be considered in evaluating my employment application or continued employment. I hereby authorize these persons, companies, organizations or corporations to answer all questions or release any information regarding the items listed in this paragraph. I hereby release them from any liability and hold them harmless from any claim for releasing any truthful information within their knowledge and/or records.

I authorize the Company to release to any person, firm, entity or organization with which I may seek employment in the future, any truthful information concerning my work experience with the Company. I hereby release and hold the Company harmless from any claim for releasing any truthful information within its knowledge and/or records.

I understand that any job offer that may be extended to me will be contingent upon the successful completion of a drug and alcohol test.

I certify that the answers given by me to the foregoing questions and during any interviews are true and correct without consequential omissions, and understand that, if employed, omissions and/or false statements on this application or during any interviews may result in dismissal. **I understand and acknowledge that, if hired, my employment is for no definite period and either the Employer or I may terminate our relationship at will at any time, without notice or any reason, and that this employment application does not constitute an employment contract.** I have had an opportunity to have my questions about this statement's content and intent answered and understand its terms.

Date

Signature of Applicant