

Personal

Name _____
LAST FIRST MIDDLE

Address _____ Social Security # _____
STREET

_____ E-mail address _____
CITY STATE ZIP CODE

Telephone # (_____) _____ Mobile or Other Phone # (_____) _____

If necessary, best time to call you at home is _____ : _____
AM
PM

May we contact you at work? Yes No

If yes, work number and best time to call (_____) _____ : _____
AM
PM

Are you over 18 years of age? Yes No

List positions previously applied for _____ None

Are you legally eligible for employment in this country? Yes No

Have you ever been convicted of a crime? Yes No

Answering "yes" to this question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness, and nature of the violation, rehabilitation and position applied for will be taken into account.

If yes, please provide date(s) and details _____

Work Preference

Date available for work ____ / ____ / ____

Type of employment desired Full-time Part-time Temporary Seasonal

Will you relocate if job requires it? Yes No

Will you travel if job requires it? Yes No

Are you able to meet the attendance requirements of the position? Yes No

Will you work overtime (more than 40 hours in a week)? Yes No

Education

| High School City/State | Circle grade completed | | | | Did you graduate? | |
|--|------------------------|---|-----------------|---|---|----|
| | 1 | 2 | 3 | 4 | Yes | No |
| College/Technical School/Other City/State | # of Years | | Course of Study | | Degree, diploma, certificate and honors received | |
| | | | | | | |
| | | | | | | |
| Other job-related educational institutions, licenses, certifications, etc | | | | | | |

Employment History

Provide the following information of your past and current employers, assignments or volunteer activities, starting with the most recent (use additional sheet if necessary). Explain any gaps in employment in comments section below.

| | | | | |
|--|----------------------------------|----------------------------|-----|--|
| EMPLOYER | TELEPHONE # () | DATES EMPLOYED | | SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES |
| | | FROM | TO | |
| ADDRESS | | | | |
| STARTING JOB TITLE/FINAL JOB TITLE | | HOURLY RATES/SALARY | | |
| | | STARTING | | |
| IMMEDIATE SUPERVISOR AND TITLE | | \$ | PER | |
| REASON FOR LEAVING | | HOURLY RATES/SALARY | | |
| | | FINAL | | |
| MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER | | \$ | PER | |
| EMPLOYER | TELEPHONE # () | DATES EMPLOYED | | SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES |
| | | FROM | TO | |
| ADDRESS | | | | |
| STARTING JOB TITLE/FINAL JOB TITLE | | HOURLY RATES/SALARY | | |
| | | STARTING | | |
| IMMEDIATE SUPERVISOR AND TITLE | | \$ | PER | |
| REASON FOR LEAVING | | HOURLY RATES/SALARY | | |
| | | FINAL | | |
| MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER | | \$ | PER | |
| EMPLOYER | TELEPHONE # () | DATES EMPLOYED | | SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES |
| | | FROM | TO | |
| ADDRESS | | | | |
| STARTING JOB TITLE/FINAL JOB TITLE | | HOURLY RATES/SALARY | | |
| | | STARTING | | |
| IMMEDIATE SUPERVISOR AND TITLE | | \$ | PER | |
| REASON FOR LEAVING | | HOURLY RATES/SALARY | | |
| | | FINAL | | |
| MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER | | \$ | PER | |
| EMPLOYER | TELEPHONE # () | DATES EMPLOYED | | SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES |
| | | FROM | TO | |
| ADDRESS | | | | |
| STARTING JOB TITLE/FINAL JOB TITLE | | HOURLY RATES/SALARY | | |
| | | STARTING | | |
| IMMEDIATE SUPERVISOR AND TITLE | | \$ | PER | |
| REASON FOR LEAVING | | HOURLY RATES/SALARY | | |
| | | FINAL | | |
| MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER | | \$ | PER | |

Comments INCLUDING EXPLANATION OF ANY GAPS IN EMPLOYMENT _____

Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying for.

References

List name and telephone number of three business/work references that are **not** related to you and are **not** previous supervisors. If not applicable, list three school or personal references that are not related to you.

| NAME | TELEPHONE | NUMBER OF YEARS KNOWN |
|------|-----------|-----------------------|
| | () | |
| | () | |
| | () | |

Applicant Statement

I certify that all the information I have provided in order to apply for and secure employment with Chariton Valley Electric Cooperative is true, complete, and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application or (ii) immediately discharge me from Chariton Valley Electric Cooperative, when it is discovered.

I understand that I may be required to submit to a post-offer, pre-hire physical examination in order for Chariton Valley Electric Cooperative to determine my physical ability to perform the job.

I understand my employment may be contingent upon the results of a drug screen for illegal drugs. A confirmed positive screen will result in my disqualification from employment.

I authorize and consent to my references, employers and/or employer representatives, public agencies, licensing authorities, and educational institutions and persons or organizations named in this application and/or accompanying resume to release any information to Chariton Valley Electric Cooperative that may be required to make an employment decision.

I understand this application remains current for 12 months. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and complete a new application.

I understand my employment is not guaranteed for any term, and my employment may be terminated by Chariton Valley Electric Cooperative or myself at any time and for any reason. No manager, supervisor or representative of Chariton Valley Electric Cooperative is authorized to make an oral or written assurance or promise of continued employment.

Do not sign until you have read the above APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____ Date ____/____/____