CHARLES MIX ELECTRIC ASSOCIATION, INC. APPLICATION FOR EMPLOYMENT An Equal Opportunity Employer

PERSONAL

Name			Date				
Last	First	Middle					
Present Address _							
	Number	Street	City	State	ZIP		
Home Telephone _	Business Telephone						
Are you at least 18	years of age?	YES N	0				
Do you have the le	gal right to remain a	nd work in the U	Inited States?	☐ YES	□ NO		
Type of Visa (if app	olicable)						
Have you ever been convicted of any crime other than a minor traffic offense within the last five years? No YES If yes, nature of crime, when, where, and disposition of case (conviction of a crime is not an automatic bar to employment.)							
GENERAL							
Position Applying f	or						
Salary Desired	Date Available for Work						
How were you refe	erred to this organizat	tion?					
Have you ever wor	ked for this organiza	tion before?	□ NO □	☐ YES			
If yes, give details:	Dates		Position				

This application is current only for thirty (30) days, at the conclusion of which time, if you have not heard from us and still wish to be considered for employment, it will be necessary for you to fill out a new application.

EMPLOYMENT HISTORY

Most Recent or Present Employer

Name of Company		From	To
Address		Phone ()
Your Job Title and Duties			
Supervisor	Starting Pay		Ending Pay
Reason for leaving			
Next Previous Employer			
Name of Company		From	То
Address		Phone ()
Your Job Title and Duties			
Supervisor	Starting Pay		Ending Pay
Reason for leaving			
Next Previous Employer			
Name of Company		From	То
Address		_Phone ()
Your Job Title and Duties			
Supervisor	Starting Pay		Ending Pay
Reason for leaving			
Next Previous Employer			
Name of Company		From	То
Address		_Phone ()
Your Job Title and Duties			
Supervisor	Starting Pay		Ending Pay
Reason for leaving			

EDUCATION

	Name & Location	Course of Study	Did you graduate?
			If so, degree rec'd.
High School			
College			
Trade/TechSchool			
Other			
MILITARY SERVICE	CE		
Branch of Service		From	To
Rank at time of dis	charge		
	es		
REFERENCES			
Name			
	City		State Zip
	Cell Pho		
· /		· /	
Name			
	City		State Zip
	Cell Pho		
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Name			
	City		State Zip
	Cell Pho		r

CERTIFICATION

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct without any mental reservation whatsoever. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any other document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

I hereby authorize the Company to thoroughly investigate my references, work record, education and any other matters related to my suitability for employment and, further, authorize my former employers to disclose to the company any and all of my employment records, including disciplinary reports and letters of reprimand, without giving me notice of such disclosure. In addition, I hereby release the Company, my former employers, their respective directors, officers, employees and agents, and all other persons from any and all claims, demands, and liabilities arising out of or in any way related to such investigation or disclosure.

I understand and agree that if I am employed, my employment and compensation are for no definite or determinable period and may be terminated at any time, with or without cause and with or without notice, at the option of either myself or the Company. I further understand and agree that no representative of the Company has any authority to enter into any agreement, written or verbal, for employment for any specified period of time or to make any binding representation or agreements, contrary to the foregoing.

Applicant's Signature

Date