## WEBSTER ELECTRIC COOPERATIVE

PO 87 - 120 Vivian St, Marshfield Missouri 65706 Fax: 417-859-4579

## **APPLICATION FOR EMPLOYMENT**

## **An Equal Opportunity Employer**

We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

Job Applied for			Tod	ay's Date	
Are you seeking: Full-time	Part-time	Temporary	employment? When co	uld you start work?	
Last Name	ast Name Middle Name		Name	Telephone Number	
Present Street Address		City	State	Zip Code	
Are you 18 years of age or older (If you are hired, you may be require	r? ed to submit proof of	age.)			Yes  No [
If hired, can you furnish proof yo	ou are eligible to w	ork in the U.S.?			Yes 🗌 No [
Have you ever applied here before	ore? Yes	□ No □	If yes, when?		
Were you ever employed here?			If yes, when?		
Have you ever been convicted on plea of "guilty" or "no contest." E					Yes  No [
If yes, give details (A conviction will not nece	essarily disqualify an	applicant for emplo	yment.)		
If employed, do you expect to be or employment outside of our jol					Yes 🗌 No [
If yes, give details					
Do you have a valid driver's lice					
			Class of License _		
Have you had your driv	ver's license suspe	ended or revoked	in the last 3 years?		Yes No [
If yes, give detail	ils:				
List professional, trade, busines: color, religion, national origin, se					
LIST NAME AND ADDRESS	OF SCHOOLS	}	Number of Years Completed	Diploma/ Degree/ Certificate	Subjects Studied
High School or GED:					
High School or GED: College or University: Vocational or Technical:					

military service and any	s in consecutive order with pre- periods of unemployment. if s upon acceptable references from	esent or last employer listed first. Account for all periods of time including elf-employed, give firm name and supply business references. <b>Note: A job current and former employers.</b>			
NAME OF EMPLOYER		JOB TITLE AND DUTIES			
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM TO			
CITY, STATE, ZIP CODE		PAY: START \$ FINAL \$			
SUPERVISOR(S)	TELEPHONE	Reason For Leaving			
NAME OF EMPLOYER		JOB TITLE AND DUTIES			
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM TO			
CITY, STATE, ZIP CODE		PAY: START \$ FINAL \$			
SUPERVISOR(S)	TELEPHONE	REASON FOR LEAVING			
NAME OF EMPLOYER		JOB TITLE AND DUTIES			
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM TO			
CITY, STATE, ZIP CODE		PAY: START \$ FINAL \$			
SUPERVISOR(S)	TELEPHONE	REASON FOR LEAVING			
NAME OF EMPLOYER		JOB TITLE AND DUTIES			
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM TO			
CITY, STATE, ZIP CODE		PAY: START \$ FINAL \$			
SUPERVISOR(S)	TELEPHONE	REASON FOR LEAVING			
Have you worked or attende	ed school under any other nam	es? Yes			
		Yes \( \square \) No \( \square \)			
<u>-</u>		Yes			
	elatives or former employers.				
Name		Address Phone			
for employment and may result in my of authorize the investigation of any of organizations to provide relevant inforstatements.  I understand I may be required to surequired.  I understand that if I am extended and of any or all medical information as mail understand that if I control the control of employment NC CONTRACT OF EMPLOYMENT NC COOPERATIVE HAS THE AUTHORISIGNED BY THE GENERAL MANA	In this employment application is true and codismissal if discovered at a later date.  In all statements contained in this applicat mation and opinions that may be useful in accessfully pass a drug screening examination offer of employment it may be conditioned as be deemed necessary to judge my capal CATION, VERBAL STATEMENTS BY M. DR GUARANTEE EMPLOYMENT FOR JITY TO ENTER INTO AN AGREEMENT CREER AND THE EMPLOYEE. IF EMPLO ED AT ANY TIME, WITH OR WITHOUT RI	TATEMENT CAREFULLY BEFORE SIGNING complete. I understand that any false information or omission may disqualify me from further consideration con. I also authorize, whether listed or not, any person, school, current employer, past employers and making a hiring decision. I release such persons and organizations from any legal liability in making such tion. I hereby consent to a pre- and/or post-employment drug screen as a condition of employment, if upon my successfully passing a complete pre-employment physical examination. I consent to the release polity to do the work for which I am applying.  NAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED ANY DEFINITE PERIOD OF TIME. ONLY THE GENERAL MANAGER OF WEBSTER ELECTRIC OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, YED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EASON AND WITH OR WITHOUT NOTICE.			
Signature: Date: This application for employment will remain active for a limited time. Ask the organization's representative for details.					