ELKHORN RURAL PUBLIC POWER DISTRICT

APPLICATION FOR EMPLOYMENT

"WE ARE AN EQUAL OPPORTUNITY EMPLOYER"

Name:	PERSONAL				
(Last) (First) (Middle) Present Address: (Mailing Address, Street, City, State, Zip) How long have you lived at present address? Telephone No: Are you related to any current employee?	Name:				
(Mailing Address, Street, City, State, Zip) How long have you lived at present address? Telephone No:		(First)	(Middle)		
How long have you lived at present address? Telephone No:	Present Address:				
Are you related to any current employee? If yes, state their name and relationship: Position applied for? Are you willing to work if required for outages/ emergencies: Would you accept any other position? Date available for employment? Date available for employment? Work skills you possess: Work skills you possess: Do you have a current driver's license? What kind? Has your driver's license ever been revoked? If yes, Why?	(Mailing Address, Street, City, State	e, Zip)			
Are you related to any current employee? If yes, state their name and relationship: Position applied for? Would you accept any other position? Date available for employment? Work skills you possess: Work skills you possess: Do you have a current driver's license? What kind? Has your driver's license ever been revoked? If yes, Why?	How long have you lived at present address?	Telephone No:			
If yes, state their name and relationship: Position applied for? Would you accept any other position? Date available for employment? Work skills you possess: Work skills you possess: Work skills you possess: What kind? Has your driver's license ever been revoked? If yes, Why?		Alt. Telephone No:			
Position applied for?	Are you related to any current employee?				
Would you accept any other position? emergencies: Date available for employment? Irregular shifts? Work skills you possess: Saturdays or Sundays? Work skills you possess: Holidays? Do you have a current driver's license? What kind? Has your driver's license ever been revoked? If yes, Why? Are you able to perform the duties of the job for which you are applying with or without a reasonable	If yes, state their name and relationship:				
Would you accept any other position? Over 40 hours per week? Date available for employment? Irregular shifts? Work skills you possess: Saturdays or Sundays? Work skills you possess: Holidays? Do you have a current driver's license? Travel? What kind?	Position applied for?		if required for outages/		
Date available for employment? Nights? Work skills you possess: Saturdays or Sundays? Work skills you possess: Holidays? Do you have a current driver's license?	Would you accept any other position?		week?		
Work skills you possess: Saturdays or Sundays? Work skills you possess: Holidays? Do you have a current driver's license?		Irregular	shifts?		
Work skills you possess: Holidays? Travel? Do you have a current driver's license? What kind?	Date available for employment?		-		
Travel? Do you have a current driver's license? What kind? Has your driver's license ever been revoked? If yes, Why? Are you able to perform the duties of the job for which you are applying with or without a reasonable	NATE OF STREET, STREET				
Do you have a current driver's license? 	Work skills you possess:		· · · · · · · · · · · · · · · · · · ·		
What kind? Has your driver's license ever been revoked? If yes, Why? Are you able to perform the duties of the job for which you are applying with or without a reasonable		'	Tavel:		
Has your driver's license ever been revoked? 		Do you have a current driver's license?			
Has your driver's license ever been revoked? 					
If yes, Why?		What kind?			
If yes, Why?		Has your driver's license ov	or boon roveked?		
Are you able to perform the duties of the job for which you are applying with or without a reasonable					
		If yes, Why?			

Eligibility for Employmen	IT	
If you are not a U.S. citizen, does your VISA or immigration status		
	alien registration number be provided?	
EDUCATION		
	n front of the g	grade
910	_1112	Graduated?
lilitary, etc.):		
EMPLOYMENT EXPERIENC	E	
orn Rurual Public Power Distric	:t:	(Y/N)
Fro	m:	То:
Supervisor:		
List most current first, nex	t most current,	second, etc.)
?		
Employer Name:		
Address:		
	To:	
Employer Name:		
Addross		
Date Worked:		
Employer Name:		
Address:		
Date Worked:	From:	
	То:	
	VISA or immigration status EDUCATION de Completed by placing an X i9101314Degrees Re ilitary, etc.): EMPLOYMENT EXPERIENC forn Rurual Public Power District Fro Supervisor: Fro Supervisor: [List most current first, nex ? Employer Name: Address: Date Worked: Employer Name: Address: Employer Name:	VISA or immigration status If employed, ca alien registrati EDUCATION de Completed by placing an X in front of the g 9101112 13141516 Degrees Received: ilitary, etc.): EMPLOYMENT EXPERIENCE orn Rurual Public Power District: From: [List most current first, next most current, ? (List most current first, next most current, ? Employer Name: Date Worked: From: Employer Name: Date Worked: From: Employer Name:

	MILIT	ARY	1		
Military Service?	If yes, From:	Branch of Service	MOS/Duties		
	То:				
	ACTIV	ITIES			
(Civic, athletic, ect.):					
APPLICANT'S STATEMENT					
The facts set forth above are true and complete, I hereby authorize investigation of all statements contained in this application and full disclosure of my present and prior work record. I understand that employment is contingent upon this investigation and, if employed, false statements in this application shall be considered sufficient cause for dismissal. I hereby release Elkhorn Rual Public Power District from any liability for any statements made and/or documents released. I understand that the documents release may include a record of disciplinary action assessed by the company or previous employers. I understand that certain positions offered may require a pre-employment physical examination by a company designated physician and that this physical is a part of the employment process.					
I further understand that as part of this physical examination, I will be required to submit to tests to determine the presence or use of alcohol, drugs or other controlled substances, and, if I refuse such tests, my application for employment will be rejected.					
(Date)		(Signature of Appl	icant)		