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EMPLOYMENT APPLICATION

Davies-Martin County REMC is an equal opportunity employer. Applicants are considered for employment without regard to race, color, religion, sex, age, disability, national origin, veteran status or any other basis prohibited by law. Davies-Martin County REMC will comply with its legal obligation to provide reasonable accommodation to qualified individuals with disabilities and for religious beliefs.

Position Applying for: _____ Date: _____
(Job Description given with application)

First Name: _____ Last Name: _____ Middle Initial: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Home Telephone: _____ E-mail: _____

Alternate Phone Number(s): _____

Are you legally eligible to work in this country? Yes No

If you are under 18 years of age, are you able to provide the required proof of your eligibility to work? Yes No

Are you able to perform the essential functions of this position? Yes No

Do you have a valid driver's license? Yes No License # _____ Expires: _____
If yes, is it a Commercial Driver's License (CDL)? ... Yes No

Can you travel if the position requires it? Yes No

Have you previously been employed by Davies-Martin County REMC
or another electric cooperative? Yes No

Are you related to any Davies-Martin County REMC employee or Director of the Board? Yes No
If yes, whom? Relationship? _____

Are you currently employed? Yes No

Are you available to work: Full-time
 Part-time (please indicate times available: Mornings Afternoons)
 Temporary (please indicate dates available: _____ to _____)

What is the date that you are available to work? _____

What is your required salary range? _____

What is the best time to contact you? _____

EDUCATIONAL BACKGROUND*

Starting with your most recent school attended, provide the following information.

Type of Education	Name and Location	GPA	Years completed?	Major and Minor	Degree Earned
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

*Resume information may be substituted.

SKILLS AND TRAINING

Computer skills (software programs, hardware, operating systems) _____

Other skills or experiences that are pertinent to the job applied for _____

PROFESSIONAL REFERENCES

Name	Title	Company	Phone Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PERSONAL REFERENCES

Name	Address	Relationship To You	Phone Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

EMPLOYMENT EXPERIENCE**

*Start with your present or last job. You may exclude organizations that indicate race, color, religion, gender, national origin, disabilities or any other protected status. **Resume information may be submitted – but, may not be accepted in place of all of the information requested below.*

Employer: _____ Contact Number: _____

Address: _____

Supervisor: _____ Your Job Title: _____

Dates Employed: _____ To _____ Starting Salary: _____ Ending Salary: _____

Your Duties: _____

Reason for leaving: _____

Discharged Voluntary Resignation Involuntary Resignation

Employer: _____ Contact Number: _____

Address: _____

Supervisor: _____ Your Job Title: _____

Dates Employed: _____ To _____ Starting Salary: _____ Ending Salary: _____

Your Duties: _____

Reason for leaving: _____

Discharged Voluntary Resignation Involuntary Resignation

Employer: _____ Contact Number: _____

Address: _____

Supervisor: _____ Your Job Title: _____

Dates Employed: _____ To _____ Starting Salary: _____ Ending Salary: _____

Your Duties: _____

Reason for leaving: _____

Discharged Voluntary Resignation Involuntary Resignation

If you need additional space, please continue on a separate sheet of paper

May we contact the employers listed above? Yes No If no, indicate which one(s) you do NOT wish us to contact and provide the reason why you prefer that we do not contact the employer(s). _____

Have you ever been discharged, permitted to resign rather than be discharged, or asked to resign from any position? Yes No If yes, please state the employer(s) and the reason(s) for the discharge or resignation. _____

APPLICANT STATEMENT

Please indicate that you have read and understand each paragraph of the Applicant's Statement by placing your initials beside each paragraph.

_____ I certify that this application was completed by me and that all entries and information in it are TRUE and COMPLETE to the best of my knowledge. I understand that false, misleading or omitted information in my application may result in the rejection of my application, the revocation of an offer of employment, or subsequent discharge.

_____ I authorize investigation of all statements contained in this application, information supplied in my resume and/or any other information supplied either in writing or verbal as may be necessary in arriving at an employment decision. I understand that an investigation may be made and information may be obtained through interviews with personal references and past employers, through a credit check, a criminal history check and/or a driver's record check. This inquiry may include information as to, among other things, my character, general reputation and personal characteristics, as well as information about my work performance and workplace conduct. I consent to this investigation and to the consideration of any statements of references, former employers or others that are given in response to the inquiry. If Daviess-Martin County REMC decides to obtain a consumer credit report, I understand that Daviess-Martin County REMC will provide, at my request, the name and address of the reporting agency so I may obtain from such reporting agency the nature and substance of information contained in such report.

_____ I hereby release all parties, including but not limited to Daviess-Martin County REMC, my personal references and previous employers, and their respective officers and employees, from liability for any damages, losses or claims that may result from their furnishing information to Daviess-Martin County REMC concerning me or any action Daviess-Martin County REMC takes on the basis of such information.

_____ I understand that, according to federal law, all individuals who are hired must, as a condition of employment, produce certain documentation to verify their identity and United States citizen status or, if aliens, their legal authorization to work in the United states. As a consequence, I understand that any offer of employment to me is contingent upon my ability to produce the required documentation within the time period required by law.

_____ I understand that this application is not, and is not intended to be, a contract of employment and that any resulting employment is for no fixed period of time and is terminable at any time and for any reason by me or by Daviess-Martin County REMC. I further understand that statements which may be contained in policies, practices, handbooks or other material do not create any guarantee of employment and that Daviess-Martin County REMC has the right to modify, amend or terminate policies, practices, benefits plans or other programs within the limits and requirements imposed by law. I understand that no representative of Daviess-Martin County REMC, other than an officer, has the authority to enter into any agreement for any specific period of time or to make any agreement contrary to the foregoing and that such agreement must be in writing and signed by a duly authorized representative of Daviess-Martin County REMC to be binding.

_____ I understand that, upon employment, I will sign an agreement relating to confidential information, if required.

_____ I certify that I am not bound by any employment contract or non-competition agreement that would be breached by any employment that might be offered to me by the Company, nor am I in possession or nor will I at any time reveal to the Company, under any circumstances, any proprietary or confidential information that is the subject of any contract, non-disclosure agreement or prior work relationship involving any other person or entity.

_____ I understand that this application remains current for only 60 days. 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 for me to reapply and fill out a new application.

Signature

Date

Checking this box certifies that I have read and understand the above Applicant Statement.