Clarke Electric Cooperative, Inc. 1103 N Main St • P.O. Box 161 Osceola, Iowa 50213-0161 641-342-2173 • 800-362-2154 • Fax 641-342-6292 E-mail• jeckels@cecnet.net Website: www.cecnet.net

Employment Application

Notice to Any Person Seeking Employment with CEC

- Those applicants requiring reasonable accommodations to the applications and/or interview process should notify a representative of the Human Resources Department.
- Your application will be considered only for the position for which you apply, therefore:
 - You must complete another application each time you wish to apply for another available position.
 - You must complete the entire application even if you have attached/submitted a resume.
 - You must sign and date on the back of the application.
- After the time period for accepting applications closes, all applications will be reviewed. You will be contacted via letter or phone regarding the outcome of the evaluations.
- Unsolicited applications and resumes are kept on file for 60 days.

EQUAL EMPLOYMENT OPPORTUNITY POLICY

It is the policy of Clarke Electric Cooperative, Inc. (CEC) to be an Equal Opportunity Employer. The Cooperative affords employment to those qualified persons without regard to race, color, religion, age, sex, national origin, sexual orientation, creed, disability, marital status or status with regard to public assistance.

We have directed all managers and supervisors to emphasize this attitude in recruiting, hiring, and promoting persons in all job classifications. A fair and unbiased opportunity to advance within FEC is offered to all qualified persons.

NOTICE TO HANDICAPPED/DISABLED APPLICANTS

CEC will not discriminate against any applicant for employment because of physical or mental disability in regard to any position for which an applicant is qualified. The Cooperative agrees to employ, advance in employment, and otherwise treat qualified individuals with disabilities without discrimination based upon their physical or mental disability in all employment practices.

NOTICE TO DISABLED VETERANS AND VETERANS OF THE VIETNAM ERA

It is the Cooperative's policy to provide employment and advance in employment qualified disabled veterans and veterans of the Vietnam Era at all levels and segments of the organization. The Cooperative adheres to and is subject to 38 USC 4212 of the Vietnam Era Veterans Readjustment Act of 1974.

EMPLOYMENT OF RELATIVES

In order to control potential conflict of interest, the Cooperative will not hire any relative of a Director or employee to fill a regular full-time position. A close relative is defined as spouse, child (including step or in-law), grandchild, parent, grandparent, brother (including step, in-law, or half) or sister (including step, in-law, or half).

PRE-EMPLOYMENT EXAMINATIONS

To ensure the continued health and safety of all employees and members of CEC, all applicants who have been given an offer of employment must complete a physical examination and test for illegal drugs. Employment is contingent upon satisfactory completion of a physical examination and a negative drug test. The examination and testing are conducted by a LREC designated physician at no cost to the applicant. The physical examination will ensure the applicant can perform the essential physical requirements of the position.

EMPLOYMENT ELIGIBILITY

Within three (3) days of starting employment with CEC, an employee must complete an Eligibility of Employment Form (Form I-9). The purpose of the form is to ensure all employees are eligible to work in the United States.

Position applied for			Date of application	_//
Name	LAST	FIRST	MIDDLE	

Personal

Name					
LAST	FIRS	\$T	MIDD		
Address			Social Secu	urity #	
			E-mail add	Iress	
CITY	STA	TE ZIP CODE			
Telephone # ()	Mobi		hone # ()	
If necessary, best time to call you at home is	\$	AM : PM			
May we contact you at work? See Yes	ю				^ ^ /
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 thi	s country?	Yes 🗌 No			
Have you ever been convicted of a crime?	🗌 Yes 🗌	No			
	such as date of the	this question does not e offense, seriousness, taken into account.	t constitute an autor and nature of the v	matic bar for employr <i>r</i> iolation, rehabilitation	nent. Factors ∩ and position
If yes, please provide date(s) and details					
	Work P	reference			
Date available for work//					
Type of employment desired Full-time] Part-time 🗌 🛛	Femporary 🗌 Sea	asonal		
Will you travel if job requires it? Yes] No				
Are you able to meet the attendance require	ments of the pos	sition? 🗌 Yes [] No		
Can you work overtime (more than 40 hours	in a week)?	🗌 Yes [] No		
	Edu	cation			
High School	Circle grade c	completed		Did you grae	duate?
City/State	1	2 3		Yes	No
College/Technical School/Other City/State	# of Years	Course of S		Degree, diploma, c honors received	ertificate and
	┝────┤				
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 EN	1	SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
ADDRESS	()	FROM	ТО	PERFORMED AND JOB RESPONSIBLEMES
STARTING JOB TITLE/FINAL JOB TITLE		HOURLY RAT		
		STAR	PER	
IMMEDIATE SUPERVISOR AND TITLE		Ŷ	T ER	
REASON FOR LEAVING		HOURLY RAT	res/salary	
		FIN	1	
MAY WE CONTACT FOR REFERENCE?	□ YES □ NO □ LATER	\$	PER	
EMPLOYER	TELEPHONE #	DATES EN	1	
ADDRESS	()	FROM	TO	PERFORMED AND JOB RESPONSIBILITIES
STARTING JOB TITLE/FINAL JOB TITLE		HOURLY RAT		
		STAR	-	
IMMEDIATE SUPERVISOR AND TITLE		\$	PER	
REASON FOR LEAVING		HOURLY RAT	res/salary	
		FIN		
MAY WE CONTACT FOR REFERENCE?	□ YES □ NO □ LATER	\$	PER	
EMPLOYER	TELEPHONE #	DATES EN	T	
	TELEPHONE # ()	FROM	TO	SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
EMPLOYER ADDRESS	TELEPHONE # ()		T	
	TELEPHONE # ()		ТО	
ADDRESS	TELEPHONE # ()	FROM HOURLY RAT	TO TES/SALARY TING	
ADDRESS	TELEPHONE # ()	FROM HOURLY RAT	TO	
ADDRESS STARTING JOB TITLE/FINAL JOB TITLE	TELEPHONE # ()	FROM HOURLY RAT	TO TES/SALARY TING PER	
ADDRESS STARTING JOB TITLE/FINAL JOB TITLE IMMEDIATE SUPERVISOR AND TITLE	TELEPHONE # ()	FROM HOURLY RAT STAR \$ HOURLY RAT	TO TES/SALARY TING PER TES/SALARY AL	
ADDRESS STARTING JOB TITLE/FINAL JOB TITLE IMMEDIATE SUPERVISOR AND TITLE	TELEPHONE # ()	FROM HOURLY RAT STAR \$ HOURLY RAT	TO TES/SALARY TING PER TES/SALARY	
ADDRESS STARTING JOB TITLE/FINAL JOB TITLE IMMEDIATE SUPERVISOR AND TITLE REASON FOR LEAVING	()	FROM HOURLY RAT STAR \$ HOURLY RAT	TO TES/SALARY TING PER TES/SALARY AL PER	PERFORMED AND JOB RESPONSIBILITIES
ADDRESS STARTING JOB TITLE/FINAL JOB TITLE IMMEDIATE SUPERVISOR AND TITLE REASON FOR LEAVING MAY WE CONTACT FOR REFERENCE? EMPLOYER	()	FROM HOURLY RAT STAR \$ HOURLY RAT FIN \$	TO TES/SALARY TING PER TES/SALARY AL PER	PERFORMED AND JOB RESPONSIBILITIES
ADDRESS STARTING JOB TITLE/FINAL JOB TITLE IMMEDIATE SUPERVISOR AND TITLE REASON FOR LEAVING MAY WE CONTACT FOR REFERENCE?	()	FROM HOURLY RAT STAR \$ HOURLY RAT FIN \$ DATES EN	TO TES/SALARY TING PER TES/SALARY AL PER PER PER	PERFORMED AND JOB RESPONSIBILITIES
ADDRESS STARTING JOB TITLE/FINAL JOB TITLE IMMEDIATE SUPERVISOR AND TITLE REASON FOR LEAVING MAY WE CONTACT FOR REFERENCE? EMPLOYER	()	FROM HOURLY RAT STAR \$ HOURLY RAT FIN \$ DATES EN	TO res/salary TING PER res/salary AL PER MPLOYED TO	PERFORMED AND JOB RESPONSIBILITIES
ADDRESS STARTING JOB TITLE/FINAL JOB TITLE IMMEDIATE SUPERVISOR AND TITLE REASON FOR LEAVING MAY WE CONTACT FOR REFERENCE? EMPLOYER ADDRESS	()	FROM HOURLY RAT STAR \$ HOURLY RAT FIN \$ DATES EN FROM	TO TES/SALARY TING PER TES/SALARY AL PER TO TO TO TES/SALARY	PERFORMED AND JOB RESPONSIBILITIES
ADDRESS STARTING JOB TITLE/FINAL JOB TITLE IMMEDIATE SUPERVISOR AND TITLE REASON FOR LEAVING MAY WE CONTACT FOR REFERENCE? EMPLOYER ADDRESS	()	FROM HOURLY RAT STAR \$ HOURLY RAT FIN \$ DATES EN FROM HOURLY RAT	TO TES/SALARY TING PER TES/SALARY AL PER TO TO TO TES/SALARY	PERFORMED AND JOB RESPONSIBILITIES
ADDRESS STARTING JOB TITLE/FINAL JOB TITLE IMMEDIATE SUPERVISOR AND TITLE REASON FOR LEAVING MAY WE CONTACT FOR REFERENCE? EMPLOYER ADDRESS STARTING JOB TITLE/FINAL JOB TITLE	()	FROM HOURLY RAT STAR S HOURLY RAT FIN S DATES EN FROM HOURLY RAT	TO TES/SALARY TING PER TES/SALARY AL PER TO TO TES/SALARY TING PER	PERFORMED AND JOB RESPONSIBILITIES
ADDRESS STARTING JOB TITLE/FINAL JOB TITLE IMMEDIATE SUPERVISOR AND TITLE REASON FOR LEAVING MAY WE CONTACT FOR REFERENCE? EMPLOYER ADDRESS STARTING JOB TITLE/FINAL JOB TITLE IMMEDIATE SUPERVISOR AND TITLE	()	FROM HOURLY RAT STAR \$ HOURLY RAT FIN \$ DATES EN FROM HOURLY RAT STAR \$	TO TES/SALARY TING PER TES/SALARY AL PER TO TO TES/SALARY TING PER TES/SALARY TING PER	PERFORMED AND JOB RESPONSIBILITIES
ADDRESS STARTING JOB TITLE/FINAL JOB TITLE IMMEDIATE SUPERVISOR AND TITLE REASON FOR LEAVING MAY WE CONTACT FOR REFERENCE? EMPLOYER ADDRESS STARTING JOB TITLE/FINAL JOB TITLE IMMEDIATE SUPERVISOR AND TITLE	()	FROM HOURLY RAT STAR \$ HOURLY RAT FIN \$ DATES EN FROM HOURLY RAT \$ HOURLY RAT	TO TES/SALARY TING PER TES/SALARY AL PER TO TO TES/SALARY TING PER TES/SALARY TING PER	PERFORMED AND JOB RESPONSIBILITIES

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 who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references who 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 the CEC 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 CEC, when it is discovered.

I understand I am required to submit to a post-offer, pre-hire physical examination in order for CEC to determine my physical ability to perform the job.

I understand my employment is 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 CEC that may be required to make an employment decision.

I understand this application remains current for 30 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 to reapply and complete a new application. A new application must be completed for each job I wish to be considered for.

I understand my employment is not guaranteed for any term, and my employment may be terminated by CEC or myself at any time and for any reason. No manager, supervisor or representative of CEC 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 ____ / ___ /____

For Administrative Use Only

Position(s) applied for Available	Not Available	
Hired Yes No		
Position hired for		Date of hire / /
From the EEO job classifications listed bel Officials and Managers Professionals Technicians	 ow, which one best describes the position fi Sales Workers Office and Clerical Workers Craft Workers (skilled) 	lled? Operatives (semi-skilled) Laborers (unskilled) Service Workers
Notes		
Completed by		Date / /