

FOR OFFICE USE ONLY	
Work Location_____	Rate_____
Position_____	Date_____

DECATUR COUNTY REMC
1430 W. Main St.
Greensburg, IN 47240
APPLICATION FOR AT-WILL EMPLOYMENT
An Equal Opportunity Employer

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, disability or any other legally-protected status.

We will give this application reasonable consideration. However, in accepting it, the Company makes no commitment of employment to the applicant.

WE ARE AN AT-WILL EMPLOYER, WHICH MEANS THAT EITHER THE EMPLOYER OR THE EMPLOYEE MAY END THE EMPLOYMENT RELATIONSHIP AT ANY TIME AND FOR ANY OR NO REASON.

BASIC INFORMATION. Please print in ink.

Position Applied For	Date of Application	
How Did You Learn About Us?		
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk-In
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other

Last Name	First Name	Middle	
Address	Number	Street	City, State ZIP
Telephone Number(s)		Social Security No.	

Are you a relative of any employee or director of Decatur County REMC?

If so, please state how _____

Salary requirements: _____ Date available _____

Have you been convicted of a crime within the last seven years? Yes No
(Conviction will not necessarily disqualify an applicant from consideration.)

If yes, please explain: _____

Do you presently have lawful, unexpired authorization to be employed in the United States?
 Yes No

***WE ARE AN AT-WILL, EQUAL OPPORTUNITY EMPLOYER**

EMPLOYMENT HISTORY. Start with your present or most recent job. Include any job-related military service assignments, self-employment and summer or part-time jobs.

1. Company			Address		Telephone
Date Employed	From	To	Starting Salary	Ending Salary	Supervisor
Your Duties:					
Reason for Leaving:					
2. Company			Address		Telephone
Date Employed	From	To	Starting Salary	Ending Salary	Supervisor
Your Duties:					
Reason for Leaving:					
3. Company			Address		Telephone
Date Employed	From	To	Starting Salary	Ending Salary	Supervisor
Your Duties:					
Reason for Leaving:					
4. Company			Address		Telephone
Date Employed	From	To	Starting Salary	Ending Salary	Supervisor
Your Duties:					
Reason for Leaving:					

If presently employed, why do you want to leave? _____

If you are currently employed, may we contact your present employer? Yes No

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REFERENCES (not former employers or relatives)

Name	Address	Phone Number

EDUCATION

School	Name and Address of School	Course of Study	Circle Last Year Completed	Did you Graduate?	List Diploma or Degree
High School			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other (Specify)			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	

If you did not graduate, why did you leave school or college? _____

Are you planning to pursue further studies? Yes No Day School Night School

If so, when, where and what courses? _____

INTERESTS. Use this space below to describe interest in the _____ industry and skills and aptitudes that you feel qualify you for a position with our company. (You may wish to include civic and community activities, professional societies in which you participate, hobbies, sports, special training or skills such as typing, accounting, etc.) If you need more space, please continue on a separate sheet.

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ACKNOWLEDGMENT

Please Read Before Signing:

The facts set forth in my employment application, resume and any attachments are true and complete. I understand that if employed, false or misleading statements on this application or any other documents I submitted shall be considered immediate cause for dismissal. In making this application for employment, I authorize you to make and/or investigate a report whereby information is obtained through personal interviews with my neighbors, friends or others with whom I am acquainted. This inquiry, if made, may include information as to my character, general reputation, personal characteristics and mode of living. This inquiry, if made, may also include information concerning any and all employment discrimination claims and/or accusations brought against me that relate to harassment and/or discrimination involving race, sex, age, religion, disability and/or national origin.

I understand that I have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of any such investigation or report that is made.

I UNDERSTAND THAT IF THE COMPANY EMPLOYS ME, EITHER THE COMPANY OR I CAN TERMINATE MY EMPLOYMENT WITH OR WITHOUT CAUSE AT ANY TIME AND FOR ANY OR NO REASON.

I also understand that no official of the company, other than the General Manager, has any authority to enter into an agreement for employment for any specific period of time or to make any agreement contrary to the foregoing.

Signature of Applicant

Date

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