

# Application for Employment



Egyptian Electric Cooperative Association

Your Touchstone Energy® Cooperative

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or the interview process should notify a representative of the Human Resources Department.

Position(s) applied for: \_\_\_\_\_ Date of Application \_\_\_\_/\_\_\_\_/\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

If necessary, best time to contact you at home:.....:\_\_\_\_ ☐AM ☐PM

May we contact you at work?.....☐Yes ☐No

If yes, work number and best time to call .....(\_\_\_\_) \_\_\_\_\_:\_\_\_\_ ☐AM ☐PM

Have you submitted an application here before?.....☐Yes ☐No

If yes, give date(s) and position(s): \_\_\_\_\_

Have you ever been employed here before? .....☐Yes ☐No

Do you have a relative who is employed by the Cooperative or serves on the Board of Directors?..... ☐Yes ☐No

Are you legally eligible for employment in this country?.....☐Yes ☐No

Date first available for work..... \_\_\_\_/\_\_\_\_/\_\_\_\_ What is your desired salary range? \$\_\_\_\_\_

Will you relocate if the job requires it?.....☐Yes ☐No Will you travel if job requires it?.....☐Yes ☐No

Are you able to meet the attendance requirements of this position? .....☐Yes ☐No

Will you work overtime if required?.....☐Yes ☐No

If no, please explain:\_\_\_\_\_

\_\_\_\_\_

## Employment History

Provide the following information of your past and current employers, assignments or volunteer activities, starting with the most recent (attach additional pages if necessary). Explain any gaps in employment in comments section on page 4.

Employer	Date Employed From      To		Summarize the type of work performed and key job responsibilities
Address			
Starting Job Title/Final Job Title			
Immediate Supervisor/Title			
Reason for Leaving			
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			

Employer	Date Employed From      To		Summarize the type of work performed and key job responsibilities
Address			
Starting Job Title/Final Job Title			
Immediate Supervisor/Title			
Reason for Leaving			
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			

Employer	Date Employed From      To		Summarize the type of work performed and key job responsibilities
Address			
Starting Job Title/Final Job Title			
Immediate Supervisor and Title			
Reason for Leaving			
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			

Employer	Date Employed From      To		Summarize the type of work performed and key job responsibilities
Address			
Starting Job Title/Final Job Title			
Immediate Supervisor and Title			
Reason for Leaving			
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			

Educational Background					
School	Number of Years Completed	Degree Diploma	GPA-Class Rank	Major	Minor

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

Additional Information

List professional, trade, business or civic associations and any offices, held.  
*Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any other similarly protected status.*

Organization	Offices Held

List special accomplishments, publications, awards, etc.  
*Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any other similarly protected status.*

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List any additional information you would like us to consider, such as special training, skills, licenses and/or certificates.

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## Applicant Statement

I certify that all information I have provided in order to apply for and secure work with Egyptian Electric Cooperative Association 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 Egyptian Electric Cooperative Association’s service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume, or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this application remains current for one year. At the conclusion of that time, if I have not heard from Egyptian Electric Cooperative Association and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the Egyptian Electric Cooperative Association reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of Egyptian Electric Cooperative Association is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by Egyptian Electric Cooperative Association’s Executive Vice President/ General Manager.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I also understand that if I am offered employment by Egyptian Electric Cooperative Association, such employment is contingent on my passing of physical, health, hearing, background and/or other exams as required by the Cooperative.

## Additional Comments

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DO NOT SIGN THIS APPLICATION FOR EMPLOYMENT 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 \_\_\_\_/\_\_\_\_/\_\_\_\_

Please return completed application to:  
Egyptian Electric Cooperative  
Attn: HR Department  
1732 Finney Road  
Murphysboro, IL 62966, or  
employment@eeca.coop