

APPLICATION FOR EMPLOYMENT



**Salt River
Electric
Cooperative
Corporation**

We welcome you as an applicant. Your application will be given equal consideration in competition with others for positions available with Salt River Electric. SRECC is an Equal Employment Opportunity Employer.

No question is asked for the purpose of excluding any applicant due to race, creed, color, religion, sex, national origin, smoking, age (over 40), veteran status or physical or mental disabilities which, do not prevent an applicant from performing the essential functions of the job, as prohibited by applicable status or regulations.

Complete information must be furnished in order we may give you fair and appropriate consideration.

(Please Print)

PERSONAL	Last name	First	Middle	Date
	Street address			Home phone ()-
	City, State, Zip			Business phone ()-
	Have you ever applied for employment or worked for us before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when? _____			Social Security No.
	Position desired			Pay expected
	Apart from absence for religious observance, are you available for full-time work? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, what hours can you work? _____			Will you work overtime if asked? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Other special training or skills (languages, machine operation, etc.) _____ _____			When will you be available to begin work?
	How did you learn of our organization?			
	Do you have any commitments to another employer which might affect your employment with us? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain: _____			
	List any relatives working for us. (Please specify your relationship.) _____			
Have you ever been convicted of a crime, excluding misdemeanors and summary offenses? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe in full: _____				

MILITARY	Were you in the U.S. Armed Forces? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what branch? _____
	Dates of duty: From _____ To _____ Rank at discharge _____ Month Day Year Month Day Year
	List duties in the service, including special training: _____ _____ _____
	Reserve status — National Guard _____ Active Reserve _____ None _____

EMPLOYMENT HISTORY

List present employer or most recent employer first (use other side of this application, if necessary). May we contact these employers?

Yes No If not, indicate NO by the one(s) you do not wish us to contact.

Employer		Employed		Supervisor's name
Address		From _____ Mo./Yr.		Your job title
Telephone		To _____ Mo./Yr.		
Your Salary		Duties		
Start	End	_____		

Reason for leaving				

Employer		Employed		Supervisor's name
Address		From _____ Mo./Yr.		Your job title
Telephone		To _____ Mo./Yr.		
Your Salary		Duties		
Start	End	_____		

Reason for leaving				

Employer		Employed		Supervisor's name
Address		From _____ Mo./Yr.		Your job title
Telephone		To _____ Mo./Yr.		
Your Salary		Duties		
Start	End	_____		

Reason for leaving				

Employer		Employed		Supervisor's name
Address		From _____ Mo./Yr.		Your job title
Telephone		To _____ Mo./Yr.		
Your Salary		Duties		
Start	End	_____		

Reason for leaving				

Employer		Employed		Supervisor's name
Address		From _____ Mo./Yr.		Your job title
Telephone		To _____ Mo./Yr.		
Your Salary		Duties		
Start	End	_____		

Reason for leaving				



Applicant Flow Record Affirmative Action Plan Compliance

PERSONAL INFORMATION FORM

(Please Print Plainly)

We are an Equal Opportunity Employer. In order to carry out our goal of providing equal employment opportunity for all persons and to satisfy applicable federal government reporting and record keeping requirements, we ask that you please provide the information requested below. Information obtained concerning individuals shall be used only in accordance with applicable laws and regulations. This information is not made available to persons interviewing you for employment with us. Your participation is voluntary.

I. IDENTIFICATION		TODAY'S DATE
NAME (Last - First - Middle)		SOCIAL SECURITY NUMBER
PRESENT ADDRESS (Street & Number, City, State & Zip Code)		
JOBS FOR WHICH YOU ARE APPLYING		EEO JOB CATEGORY (Office Use Only)
SEX () Male () Female		AGE () Under 40 () Over 40

II. RACE/ETHNIC BACKGROUND

- American Indian or Alaskan Native - A person having origins in any of the original peoples of North America and South America (including Central America), and who maintains tribal affiliation or community attachment.
- Asian - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Black or African American - A person having origins in any of the Black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black or African American."
- Native Hawaiian or Other Pacific Islander - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White - A person having origins in any of the original peoples of Europe, North Africa or the Middle East.
- Hispanic or Latino (White race only) - A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, and of the White race.
- Hispanic or Latino (all other races) - A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, and of any race other than White.
- Race missing or unknown - Applies to Applicants only, where a resume or application that is screened is received without any racial or ethnic identification and no further contact is made with the applicant.

III. RECRUITING SOURCE

- | | |
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| <ul style="list-style-type: none"> <input type="checkbox"/> Special Protected Class Recruiting <input type="checkbox"/> Newspaper Advertisement <input type="checkbox"/> Employee Referral <input type="checkbox"/> Business or Trade School <input type="checkbox"/> Walk-in | <ul style="list-style-type: none"> <input type="checkbox"/> Unsolicited Resume or Letter <input type="checkbox"/> Private Employment Agency <input type="checkbox"/> School or College <input type="checkbox"/> Employment Office <input type="checkbox"/> Local/State Job Training Program |
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NOTICE

This form is not attached to, stored with or filed with the Application for Employment. It is not available to the Hiring Manager.