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**Buckeye Rural Electric Cooperative, Inc.**

4848 State Route 325 South

P.O. Box 200

Rio Grande, OH 45674

800.231.2732 Fax 740.379-2050

Email to: hr@buckeyerec.com

**Employment Application**

 **Print form, complete and return**

**Notice to Any Person Seeking Employment With**

**Buckeye Rural Electric Cooperative, Inc.**

• **Those applicants requiring reasonable accommodations to the applications and/or interview process should notify 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.**

• **Applications and resumes are kept on file for ninety (90) days.**

EQUAL EMPLOYMENT OPPORTUNITY POLICY

Buckeye Rural Electric Cooperative, Inc. (BREC) is committed to hiring and developing the most qualified people.  Preference for employment is given to qualified members of the available workforces in the communities that we serve.  It is out intent in all personnel actions to ensure that employees and potential employees are evaluated without regard to sex, age, race, color, religion, national origin, citizenship, military status, disability, or any other characteristic protected by applicable federal, state, or local law.  BREC does not and will not tolerate discrimination in its employment and promotion practices.

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

NOTICE TO HANDICAPPED/DISABLED APPLICANTS

BREC 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 with or without a reasonable accommodation. BREC 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.

PRE-EMPLOYMENT EXAMINATIONS

To ensure the continued health and safety of all employees and members of BREC, all applicants who have been given an offer for employment may be required to complete a physical examination and test for alcohol and/or illegal drugs. Employment is contingent upon satisfactory completion of the required pre-employment examinations. The examination and testing are conducted by BREC’s designated 3rd party administrator 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 BREC, 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 Click here to enter a date.

**Personal**

Name

 Last First Middle

Address

 Street City State Zip Code

Home Telephone       Mobile/Beeper/Other Phone

If necessary, best time to call you at home is Choose.

May we contact you at work? Choose.

If yes, work number and best time to call       Choose.

Do you have any relatives or friends who work for BREC? Choose.

If yes, please list

Are you over 18 years of age? Choose.

Are you authorized to work in the United States? Choose.

Have you ever been convicted of a crime? Choose.

Answering “yes” to this question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness, and nature of the violation, rehabilitation and position applied for will be taken into account.

If yes, please provide date(s) and details

**Work Preference**

Date available for work Click here to enter a date.

Type of employment desired Choose

Will you relocate if job requires it? Choose Will you travel if job requires it? Choose

Will you work overtime (more than 40 hours in a week)? Choose

**Education**

|  |  |  |
| --- | --- | --- |
| High School:      City/State:            | Select grade completed (# of Years) Choose | Did you graduate?Choose |
| **College/Technical School/Other****City/State** | # of Years | Course of Study | Degree, diploma, certificate and honors received |
| Click here |       |       |       |
| Click here |       |       |       |
| Click here |       |       |       |
| Other job-related educational institutions, licenses, certifications, etc. Click here |

**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. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or other protected status.

|  |  |  |  |
| --- | --- | --- | --- |
| Employer       | Telephone       | Dates Employed | If resume is not attached, summarize the type of work performed and job responsibilities. |
| Address      | From       To       |
| Starting Job Title       | Base Pay |
| Immediate Supervisor & Title       | Starting       Final        |
| Reason for Leaving       |       |
| May we contact for reference? Choose |

|  |  |  |  |
| --- | --- | --- | --- |
| Employer       | Telephone       | Dates Employed | If resume is not attached, summarize the type of work performed and job responsibilities. |
| Address      | From       To       |
| Starting Job Title       | Base Pay |
| Immediate Supervisor & Title       | Starting       Final        |
| Reason for Leaving       |       |
| May we contact for reference? Choose |

|  |  |  |  |
| --- | --- | --- | --- |
| Employer       | Telephone       | Dates Employed | If resume is not attached, summarize the type of work performed and job responsibilities. |
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| Reason for Leaving       |       |
| May we contact for reference? Choose |

|  |  |  |  |
| --- | --- | --- | --- |
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| Immediate Supervisor & Title       | Starting       Final        |
| Reason for Leaving       |       |
| May we contact for reference? Choose |

**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.

**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** | **Email Address** | **Phone** | **Length of Time Known** |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |

**Applicant Statement**

I certify that all the information I have provided in order to apply for and secure employment with Buckeye Rural Electric Cooperative, Inc. (BREC) 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 BREC, when it is discovered.

I understand I am required to submit to a post-offer, pre-hire physical examination in order for BREC to determine my

physical ability to perform the job.

I understand my employment is contingent upon the results of an alcohol and/or drug screen for illegal drugs. A confirmed positive

screen may 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 BREC that may be required to make an employment decision.

I understand this application remains current for ninety (90) 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.

No manager, supervisor, or employee of BREC has any authority to enter into an agreement for employment for any specified period of time or to make an agreement for employment other than at-will.  Only the Executive Vice President & General Manager of BREC has the authority to make any such agreement, and then only in writing.

**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** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

AN EQUAL OPPORTUNITY EMPLOYER