



EQUAL OPPORTUNITY EMPLOYER
PRE-EMPLOYMENT DRUG SCREEN REQUIRED

GREENWOOD UTILITIES
APPLICATION FOR EMPLOYMENT

APPLICATIONS ARE ACTIVE FOR A PERIOD OF 90 DAYS FROM THE DATE OF THE APPLICATION. AFTER THAT PERIOD, APPLICANTS WHO WISH TO BE CONSIDERED FOR EMPLOYMENT MUST SUBMIT A NEW APPLICATION.

(PLEASE PRINT OR TYPE)

Date of Application _____, 20____

Position(s) Applied For: _____

Minimum Salary Accepted: \$_____

NAME: _____
Last Name First Name Middle Name

ADDRESS: _____
Number & Street City State Zip

(MUST SHOW PHYSICAL ADDRESS; if mailing address is different, add where indicated)

Mailing address if different from street address: _____

Telephone Number(s): _____
Home Work Mobile

Email Address: _____

Driver's License Number: _____ State: _____ Commercial: _____
Yes No

Would you be interested in shift work? _____
Yes No

Are you at least 18 years of age? _____ (DO NOT INCLUDE YOUR AGE OR DATE OF BIRTH ON THIS APPLICATION)
Yes No

Are you legally eligible for employment in the U.S.A.? _____
Yes No

(Proof of citizenship or employment-eligible immigration status required for employment)

Are you related by kinship or marriage to any current employee of Greenwood Utilities? _____
Yes No

If yes, give name of relationship of kin _____

Have you previously been employed by Greenwood Utilities? Yes No If yes, provide the following:

From _____ to _____. Position _____

Reason for leaving _____

Have you ever been convicted of, pled guilty to, pled no contest to, or paid a fine for any criminal offense (including under the Uniform Code of Military Justice)? Yes No

(It is not necessary to include parking or speeding tickets unless you are applying for a position that requires driving. Use of information about convictions is limited to convictions that are job-related. A record of conviction does not necessarily disqualify an applicant from employment.)

EDUCATION AND MILITARY SERVICE

Name and location of elementary, middle, and junior high _____

_____ No. of years completed _____

Name and location of high school _____

Course of Study _____ No. of years completed _____

Diploma Yes No

Name and location of college _____

Course of Study _____ No. of years completed _____

Degree Yes No

Describe any other training or education _____

Military Service (Specify branch) _____ From _____ To _____

Rank and type of service _____

PERSONAL REFERENCES (Do not include relatives.)

1. _____
(Name) (Phone Number(s))

(Address)
2. _____
(Name) (Phone Number(s))

(Address)
3. _____
(Name) (Phone Number(s))

(Address)

EMPLOYMENT RECORD

List employment for the previous 10 years; list most recent job first. Use more sheets if necessary. Please account for **all** periods of unemployment (voluntary or involuntary). Use more sheets if necessary. Complete all questions asked. "See résumé" is not considered a complete response.

1. Present or most recent

Employer _____ Employed
Position _____ From _____ to _____
Phone No. _____ Supervisor _____
Hourly Rate/Salary: Starting _____ Ending _____
Job Description/Duties: _____

Reason for leaving _____

2. Previous

Employer _____ Employed
Position _____ From _____ to _____
Phone No. _____ Supervisor _____
Hourly Rate/Salary: Starting _____ Ending _____
Job Description/Duties: _____

Reason for leaving _____

OTHER INFORMATION

Is any additional information relative to social security number, change of name, nickname, or use of an assumed name necessary to allow a check on your work or education records?
Yes No

APPLICANT’S STATEMENT

I certify at the information provided in this application and any supporting documents is true and complete to the best of my knowledge and that I have not withheld anything that, if disclosed, would affect this application unfavorably. I understand that any misleading or incorrect statements or responses or willful omissions on this or any other record submitted pertinent to employment may cause this application to be void. I authorize my previous employers, schools, credit reporting agencies, and other persons named above to give any information they may have regarding me, whether or not it is in their records. I hereby fully release, forgive, and acquit such employers, schools, credit reporting agencies, or other persons from all liability for any damage resulting from information they provide. I agree to sign such additional authorizations and consents as are necessary to conduct reference and background checks on me.

I acknowledge that Greenwood Utilities requires pre-employment drug testing, and I agree to sign such additional authorizations and consents as are necessary to conduct any such testing on me.

I UNDERSTAND THAT THIS IS AN APPLICATION FOR EMPLOYMENT AND NOT AN EMPLOYMENT CONTRACT AND THAT GREENWOOD UTILITIES' RECEIPT OF THIS APPLICATION DOES NOT ENTITLE ME TO EMPLOYMENT.

I UNDERSTAND THAT EMPLOYEES OF GREENWOOD UTILITIES ARE EMPLOYED AT THE WILL OF GREENWOOD UTILITIES FOR AN INDEFINITE PERIOD AND MAY RESIGN OR BE TERMINATED AT ANY TIME, FOR ANY REASON OR FOR NO REASON, WITH OR WITHOUT NOTICE. I FURTHER UNDERSTAND THAT GREENWOOD UTILITIES MAY TAKE ANY OTHER ACTION CONCERNING EMPLOYMENT WITH GREENWOOD UTILITIES WITH OR WITHOUT CAUSE OR NOTICE AND WITHOUT FURTHER OBLIGATION TO THE EMPLOYEE AT THE SOLE AND ABSOLUTE DISCRETION OF GREENWOOD UTILITIES. THE AT WILL NATURE OF AN EMPLOYEE'S EMPLOYMENT WITH GREENWOOD UTILITIES MAY NOT BE ALTERED EXCEPT IN AN EXPRESS 'WRITTEN AGREEMENT SIGNED BY BOTH THE EMPLOYEE AND THE PRESIDENT/CEO, WHICH IS BASED UPON ACTION OF THE GREENWOOD UTILITIES COMMISSION.

I understand that any future employment duties with employer may entail operating motor vehicles which require that I have a valid driver’s license, and in some instances a valid commercial driver’s license. I hereby expressly authorize the Greenwood Police Department, the Leflore County Sheriff’s Department, or any other law enforcement agency to provide information to Greenwood Utilities verifying that I have a good and valid license, the type thereof, and also to provide Greenwood Utilities with a printout of my official driving record. I agree to hold harmless any such agency from a claim whatsoever in connection with their providing this information to my potential employer.

Signature of Applicant _____ Date _____