APPLICATION FOR EMPLOYMENT (UNION)

GRAYSON RURAL ELECTRIC COOPERATIVE COOPERATION

109 BAGBY PARK ST GRAYSON, KY 41143

We welcome you as an applicant. Your application will be given equal consideration in competition with others for positions available with this cooperative.

No question is asked for the purpose of excluding any applicant due to race, creed, color, religion, sex, national origin, age (over 40), veteran status or physical or mental disabilities which with or without accommodation, do not prevent an applicant from performing the essential functions of the job, as prohibited by applicable statute or regulations.

Complete information must be furnished in order that we may give you fair and appropriate consideration. Unsigned or incomplete application forms will be discarded. Applications will be kept on file for a period of six months.

1.	Name					
	Last	First		Middle		
2.	What position are you applying for?					
	☐ Journeyman Lineman Years of Ex	kperience?				
	☐ Apprentice Lineman Years of Ex	kperience?				
	☐ Groundman Years of Ex	kperience?				
	☐ Other:					
3.	. Home Phone Number Mobile Phone Number					
4.	Address					
	Number and Street	City	State	Zip Code		
5.	Email address:					
6.	5. What salary level are you expecting for this position?					
7.	How soon after acceptance can you sta	art work?				
8.	3. Are you legally able to be employed in the U.S.? () Yes () No					
9.	Are you related by marriage, or in any other way, no matter how remotely, to any employee or dire					
	Rural Electric Cooperative Corp.?					
	If so, state name of employee and relationship to you:					
ED	UCATION					
9.	Highest level of education completed?					

SPECIAL SKILLS OR ABILITIES

List any other skills or abilities you have:		
.ITARY SERVICE		
Are you a veteran of a branch of the military? () Yes () No	
VIOUS EMPLOYMENT RECORD		
In the space below, list employment record for	the last 10 years, starting with your last job. Please be	specific and
accurate. You may use another sheet of paper i	f necessary. If you have no work experience, please chec	k here. ()
,	Detail Description of Duties and Responsibilities	,
Employer:	· · · · · · · · · · · · · · · · · · ·	
Address:		
From: To:		
Month & Year Month & Year		
Starting Wage: Last Wage:		
Your Job Title:		
Supervisor's Name:		
Reason For Leaving:		
Employer:		
Address:		
From:To:		
Month & Year Month & Year		
Starting Wage: Last Wage:	_	
Your Job Title:	_	
Supervisor's Name:	_	
Reason For Leaving:		
Employer:		
Address:		
From:To:		
Month & Year Month & Year		
Starting Wage: Last Wage:	_	
Your Job Title:		
Supervisor's Name:	_	
Reason For Leaving:		

Updated 11/19/2024

The facts set forth in my application are true and complete and I authorize investigation as to my ability, character, ability to perform specific job functions, and verification of the information contained herein.

In consideration of my employment, I agree to conform to the rules and regulations of Grayson Rural Electric Cooperative Corp., and my employment and compensation can be terminated, with or without cause, at any time, at the option of either the Cooperative or myself.

I understand that neither this Application for Employment, nor any other statement of policy constitutes a contract of employment for any specific duration, nor any other contract, express or implied. I understand that no employee or agent of Grayson Rural Electric Cooperative Corp., other than the President and CEO, is authorized to enter into a contract of employment for any specified duration, or any other contract of employment express or implied.

I understand that any offer of employment made to me by Grayson Rural Electric Cooperative Corp. is contingent upon my ability to pass a medical examination including a drug screen test and a background check. I understand that a positive finding of illegal drug usage could result in denial of employment.

I understand that, if employed, false statements on the application shall be considered sufficient cause for dismissal, whether discovered at the time this application is filed, or anytime thereafter.

DATE	APPLICANT'S SIGNATURE