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# Southwest Tennessee Electric Membership Corporation

A Touchstone Energy® Cooperative 

## EMPLOYMENT APPLICATION

Southwest Tennessee Electric Membership Corporation places great emphasis on customer service, teamwork, problem solving, and innovation. We look for people who exemplify these qualities and are willing to work hard for our membership. Southwest Tennessee Electric Membership Corporation is an equal opportunity employer.

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**APPLICANT NAME**

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**TODAY'S DATE**

# Personal Information (Please Print Clearly)

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Previous address if less than 5 years at current address \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

I understand that upon employment, proof of legal right to work in the United States and completion of I-9 form will be required.

Are you eligible to work for any United States employer at this time?  Yes  No

If you are under 18 years of age, do you have a work permit?  Yes  No

Have you been convicted of a felony in the past ten (10) years?  Yes  No

Date(s) of Conviction: \_\_\_\_\_ Nature of Conviction(s): \_\_\_\_\_

Do you have a valid driver's license?  Yes  No License # \_\_\_\_\_ Expires \_\_\_\_\_

Do you have a valid Commercial Driver's License (CDL)?  Yes  No License # \_\_\_\_\_ Expires \_\_\_\_\_

Can you travel if the position requires travel?  Yes  No

If you have ever worked under or earned degrees under another name, please list below:

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

## Position Desired

Position Applied for \_\_\_\_\_

How did you learn of this vacancy? \_\_\_\_\_

Salary Desired (Annual) \$ \_\_\_\_\_ Date Available \_\_\_\_\_

Are you able to perform the essential functions of this position?  Yes  No

If no, what accommodation would make it possible for you to perform this job? \_\_\_\_\_

Have you previously been employed by Southwest Tennessee Electric Membership Corporation or another electric cooperative?  Yes  No

If yes, indicate position, department, and dates: \_\_\_\_\_

Do you have any relatives employed at Southwest Tennessee Electric Membership Corporation?  Yes  No

If yes, who? \_\_\_\_\_

**Southwest Tennessee Electric Membership Corporation** is an equal opportunity employer and recruits, advertises, employs, promotes, transfers, disciplines, and discharges without regard to race, color, creed, religion, national origin, age, sex, marital status, physical or mental disability, or veteran status.





Previous Employer \_\_\_\_\_

Dates Employed—From \_\_\_\_\_ To \_\_\_\_\_  
Month/Year Month/Year

Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_

Contact's Phone Number \_\_\_\_\_ Address \_\_\_\_\_

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Supervisor's Name \_\_\_\_\_ Supervisor's Job Title \_\_\_\_\_

Your Job Title \_\_\_\_\_ Your Duties \_\_\_\_\_

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Reason for leaving \_\_\_\_\_

Previous Employer: \_\_\_\_\_

Dates Employed—From \_\_\_\_\_ To \_\_\_\_\_  
Month/Year Month/Year

Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_

Contact's Phone Number \_\_\_\_\_ Address \_\_\_\_\_

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Supervisor's Name \_\_\_\_\_ Supervisor's Job Title \_\_\_\_\_

Your Job Title \_\_\_\_\_ Your Duties \_\_\_\_\_

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Reason for leaving \_\_\_\_\_

## Professional References (Please list only references that we may contact at this time)

Name	Title	Company	Phone Number
			Home
			Work
			Home
			Work
			Home
			Work



# Affidavit

**Nonbinding Application and Interview Process:** I understand that this application will be reviewed, but nothing in this application or any other documents or in the employment evaluation process shall be construed as either an offer or contract of employment or an obligation on the part of Southwest Tennessee Electric Membership Corporation to provide any benefit to me.

**Employment-At-Will:** I understand that my employment and compensation can be terminated with or without cause, and with or without notice, at any time, at the option of either Southwest Tennessee Electric Membership Corporation or myself.

I hereby declare that my statements on this application and on my resume or documents provided by me to Southwest Tennessee Electric Membership Corporation, are true and correct to the best of my knowledge. I acknowledge and agree that providing any false information may result in a decision not to hire me, or if hired, may result in the termination of my employment. I also authorize investigation of these statements. This investigation may include employment history, reasons for leaving previous employers, criminal record, credit record, driving record, social security number investigation, and degree/certificate verification. I understand that I have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation. I hereby release Southwest Tennessee Electric Membership Corporation from all liability for any damages resulting from the information obtained. This application shall be considered active for a period of time not to exceed 180 days.

I also understand that if offered employment, I will be required to take a physical examination and such examination will include blood, breath, urine, or saliva tests to determine the presence or use of alcohol or illegal controlled substances. I understand my employment will be conditional on my passing the physical examination, alcohol and controlled substance tests.

If employed, I understand that the Company reserves the right to require me to submit to a drug test at any time and also reserves the right to require me to submit to an alcohol test and/or medical examination as may be required by the Company, random or otherwise.

I hereby release the Company and the examining agency from any claims, demands, liabilities and/or damages by reason or arising out of any such alcohol or other drug test or the disclosure either to or by the Company of the results of any such test.

I authorize investigation of all statements contained in this application and authorize the references listed to give you any information concerning my previous education and employment and I release all parties from liability for any claims, demands, liability or damages that may result from furnishing of same to the Company. To the extent permitted by law, I agree to take a polygraph ("lie detector") test in the event that for reasons related to my employment, I am requested to do so.

I further understand that the Company may contact my previous employers and I authorize those employers indicated above to disclose to the Company all records and other information pertinent to my employment with them. I also authorize the Company to provide truthful information concerning my employment with it to my future prospective employers and I agree to hold it harmless for providing such information.

I hereby affirm I am qualified for the position for which I am applying and I am capable of performing the essential functions of the applied for position.

I certify that all of the information that I provide on this application and in any interview will be true and accurate. I understand that if I am employed and any such information is later found to be false or misleading in any respect, I may be dismissed.

**DO NOT SIGN UNTIL YOU HAVE READ AND UNDERSTOOD THIS STATEMENT**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



