



APPLICATION FOR EMPLOYMENT

Lexington Electric System

92 South Main Street

Lexington, TN 38351

Position Preferred: _____ Date of Application: _____

How Did You Hear About Us?

Newspaper Ad Social Media Current Employee Other: _____

Personal Information

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____ Alternate Number: _____

Email Address: _____

1. Are you legally eligible to work in the U.S.? YES NO

2. Have you ever pled guilty or been convicted of a crime (other than minor traffic offenses)? Conviction of a crime will not necessarily disqualify an individual. LES will consider the nature and gravity of the offense or conduct; the time that has passed since the offense or conduct and/or completion of the sentence; and the nature of the job sought. YES NO
If YES, please explain: _____

3. Have you ever been fired or asked to resign from a previous employer? YES NO
If YES, please explain: _____

4. Have you ever applied for a position at Lexington Electric System? YES NO
If YES, please give the date: _____

5. Have you ever worked for Lexington Electric System? YES NO
If YES, please give the date: _____

6. Are you related to anyone who is currently employed at Lexington Electric System? YES NO

If YES, please state their name and relationship to you: _____

7. Do you have a valid driver's license? YES NO

8. Do you have a valid CDL? YES NO

If YES, please specify what class: _____

9. Type of Employment Sought:

Regular Full-Time Regular Part-Time Temporary Seasonal

10. What date would you be able to begin employment at Lexington Electric System?

11. What salary or rate-of-pay do you expect to receive, if employed?

_____per_____

Education

High School

Name of School: _____ Years Completed: _____

Location: _____

Field Of Study: _____ Degree Earned: Yes No

Techincal or Trade School

Name of School: _____ Years Completed: _____

Location: _____

Field Of Study: _____ Degree Earned: Yes No

College

Name of School: _____ Years Completed: _____

Location: _____

Field Of Study: _____ Degree Earned: Yes No

Other (Specify)

Name of School: _____ Years Completed: _____

Location: _____

Field Of Study: _____ Degree Earned: Yes No

List any specialized training, apprenticeships, licenses, or certifications obtained

List any other skills or experiences that would be relevant to the job being applied for.

Employment History

Begin with most recent employer.

If you are currently employed, may we contact your present employer? Yes No

1. Current/Most Recent employer

Company Name: _____

Location: _____

Job Title: _____

Dates Employed: _____ Hourly Rate _____ Start _____ Final _____

Reason for Leaving: _____

Decription of Job Duties:

2. Employer

Company Name: _____

Location: _____

Job Title: _____

Dates Employed: _____ Hourly Rate _____ Start _____ Final _____

Reason for Leaving: _____

Decription of Job Duties:

3. Employer

Company Name: _____

Location: _____

Job Title: _____

Dates Employed: _____ Hourly Rate _____ Start _____ Final _____

Reason for Leaving: _____

Decription of Job Duties:

References

List three people who are not related to you or serve as your supervisor who can attest to your skills, knowledge, experience, and character.

Name	Phone Number	Relationship	Years Known

Applicant Acknowledgement and Authorization

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is correct, accurate, and complete to the best of my knowledge. I understand that the falsification, misrepresentation, or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I understand that submission of an application does not guarantee employment. I further understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an “at will” nature, which means that the employee may resign at any time and the employer may discharge the employee at any time with or without cause. It is further understood that this “at will” employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

I understand that if offered a position with LES, I will be required to submit to a pre-employment medical examination, drug screen, and background check as a condition of employment. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employment tests and checks will result in withdrawal of any employment offer or termination of employment if already employed.

I understand that this application is considered current and active for a period of 90 days. If I wish to be considered for employment after this period of time, I must fill out and submit a new application.

BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTAND, AND AGREE TO THE STATEMENTS ABOVE.

Signature

Printed Name

Date