Talquin Electric Cooperative, Inc. P.O. Box 1679, Quincy, FL 32353-1697

APPLICATION FOR EMPLOYMENT WE ARE AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER

APPLICANT'S STATEMENT: I understand that Talquin Electric Cooperative, Inc. ("Cooperative") is committed to providing equal opportunity in all employment practices, including but not limited to selection, hiring, promotion, transfer, and compensation to all qualified applicants and employees without regard to race; color; religion; genetic information; national origin; sex (including same sex); gender, pregnancy, childbirth, or related medical conditions; age; disability or handicap; citizenship status; service member status; or any other category protected by federal, state, or local law.

I authorize former and present employers, and professional, work, and personal references listed in the application or interview process and any other individuals I may name, to give the Cooperative or its designee any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release such parties from all liability for any damages that may result from furnishing same to the Cooperative. I also authorize the Cooperative to provide truthful information concerning my employment (if any) with it to future employers or as may be required, and I agree to hold it harmless for providing such information.

I understand that the Cooperative reserves the right, to the extent permitted by applicable law, to require drug and alcohol screening tests of an applicant or an employee either prior to employment or any time during employment and I hereby give my consent to any such tests. I consent to the release of the results of any such tests to the Cooperative or its designees. I release the Cooperative and its designees from any and all liability and damages that may result or arise from any drug test or the provision of information in connection with such a test. Testing, if any, will only occur in accordance with applicable legal requirements.

I understand that this employment application and any other Cooperative documents are not promises of employment. Should I be employed, I understand that my employment will be on a trial period initially and that I will remain an at-will employee thereafter. I further understand that, if I am employed, I can terminate my employment at any time with or without cause and with or without advance notice and that the Cooperative has a similar right. I understand that no manager, representative, or agent of the Cooperative has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing, except that the General Manager may do so in writing. In the event of my employment with this Cooperative, I will comply with all rules and regulations of the Cooperative.

I certify that the information given by me on this application and during the interview process is and will be true and complete in all respects, and I agree that if the information is found to be false, misleading, or unsatisfactory in any respect (in the Cooperative's judgment) that I will be disqualified from consideration for employment or subject to immediate termination if discovered after I am hired.

I certify that I have received a separate written notification that the Cooperative may obtain "consumer reports" (for example, criminal history, driving records, etc.) on me for use in connection with my application and, if I am hired, my employment. I authorize the Cooperative to obtain such reports.

This application will be considered "active" for a maximum of thirty (30) days. If you wish to be considered for employment after that time, you must reapply.

DO NOT SIGN UNTIL YOU HAVE READ AND UNDERSTAND THESE STATEMENTS.

Date	Applicant's Signature

Each inquiry on this application must be <u>fully answered</u> or <u>completed</u>. Otherwise, you will not be considered for employment.

PERSONAL DATA

Last Name	First Name	Middle Name	Maiden/Other Name	
Present Address Street and Number City, State, Zip	<u>.</u>	How long have you lived there: Years	Months	
Previous Address Street and Number City, State, Zip		How long did you live there: Years	Months	
Are you 18 years of age or older:		If hired, can you provide proof the in the U.S.? \Box Yes \Box No	at you are legally entitled to work	
Home Telephone:	Mobile Telephone:	Other Telephone:	E-Mail Address:	
Position Desired (Only list one choice):				
When are you available for work?	?			

CURRENT AND PREVIOUS EMPLOYMENT

Please list the names of your present and previous employers in chronological order with present or last employer listed first. Include part-time, seasonal and all other employment. If self-employed, give company name and supply business references. If you need more space, use a separate sheet of paper. DO NOT ANSWER "SEE RESUME." Fill out this form **completely**.

Employer 1		Dates En		Work Performed	
		From	То		
Telephone Numbe	r(s)	-			
Address	.(-)	_			
Address		Rate/S	Salary		
	-	Starting	Final	Were you ever disciplined? If so, for what?	
Job Title	Supervisor Name & Title	g			
Reason for Leavin	g				
Employer 2		Dates En From	nployed To	Work Performed	
		From	10		
Telephone Numbe	r(s)				
Address					
		Rate/S	-		
Job Title	Supervisor Name & Title	Starting	Final	Were you ever disciplined? If so, for what?	
		_			
Reason for Leavin	g				
Employer 3		Dates Er From	nployed To	Work Performed	
Telephone Numbe	r(s)	-			
Telephone Numbe Address	r(s)	-			
	r(s)	Rate/S			
	r(s) Supervisor Name & Title	Rate/S Starting	Salary Final	Were you ever disciplined? If so, for what?	
Address				Were you ever disciplined? If so, for what?	
Address	Supervisor Name & Title			Were you ever disciplined? If so, for what?	
Address Job Title	Supervisor Name & Title			Were you ever disciplined? If so, for what?	
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Address Job Title Reason for Leavin Employer 4 Telephone Numbe Address	Supervisor Name & Title g r(s) Supervisor Name & Title	Starting Dates En From Rate/S	Final nployed To Salary	Work Performed	

BACKGROUND INFORMATION

Are you currently working?
Ves No If "yes", name of employer:

How many days of scheduled work did you miss in the last 24 months, not including vacations, holidays and other approved leave?

Please explain fully any gaps in your employment history. <u>Be sure to account for all periods of time</u> including military service and any period of unemployment.

List any other names which you may have used and which will be necessary to verify prior to your employment:

Have you ever been terminated or asked to resign from any job?
Yes
No

If yes, please explain circumstances (use a separate sheet of paper if necessary):

May we contact your current employer? □ Yes □ No

If no, please explain:

If yes, please give dates, position and location:

Do you have any friends or relatives working for Talquin Electric Cooperative, Inc. or for a related entity?
Ves
No

If yes, name(s), relationship and location:

How were you referred to us?____

Do you have any commitments to any other employer which could affect your employment with Talquin Electric Cooperative, Inc. if hired (for example, an employment agreement, a non-competition or non-solicitation agreement, etc.? \Box Yes \Box No

If yes, explain:

EDUCATION

Education	Years Completed (Circle)	Diploma/Degree	Describe Course of Study or Major	Describe Specialized Experience, Training, Skills, and Extra-Curricular Activities
High School	9 10 11 12			
College/University	1234			
Graduate/Professional	1234			
Trade or Correspondence				

OTHER INFORMATION

List any professional or occupational registration, licensure or certification you currently hold which may be applicable:

Please provide any other information or comments, or describe any other experience that you have which would be relevant to the job for which you are applying:

CRIMINAL HISTORY

Prior to conducting a background investigation, the Cooperative will provide you with a release form that complies with the Fair Credit Reporting Act and any applicable state law.

Applicants must <u>not</u> include any information about arrests, nor any convictions that were sealed, eradicated, erased, annulled or expunged, or convictions that resulted in referral to a diversion program when responding to these two questions.

Have you ever plead no contest, nolo contendere, or guilty to a misdemeanor crime, or been convicted of a misdemeanor crime?	□Yes □ No
Have you ever plead no contest, nolo contendere, or guilty to a felony crime, or been convicted of a felony crime?	□Yes □ No

Are any charges currently pending against you?

NOTE: Answering "yes" to any of these questions does not constitute an automatic bar to employment. The Cooperative will consider the nature of the crime, its seriousness, the substantial relation to the position's functions and qualifications, the number of occurrences, the applicant's age at the time of the crime, the time elapsed since the crime, the applicant's entire work and educational history, employment references and recommendations, and the business necessity of any exclusion when required by law.

If you answered yes to any of the three questions above, please give dates/details for each incident, using additional paper as needed:

DRIVING INFORMATION (Complete only if driving is an essential function of the job for which you are applying).

Do you have a current valid driver's license?	🗆 Yes 🗆 No	If yes, License No.:	State:	Expiration Date:
•		-	-	

If you do not have a driver's license for the state in which you currently reside, why not?

Has your license ever been suspended or revoked?
Ves No If yes, explain:

Do you have personal automobile insurance?
Ves Ves No If no, explain:

Have you ever been denied personal automobile insurance or has it ever been terminated or suspended? 🗆 Yes 🗆 No If yes, explain:

Have you ever been convicted, pled guilty, or pled nolo to a charge of DWI or DUI?
Yes No Are any such charges currently pending against you? If yes to either question, explain:

Please list all moving traffic violations in the last five (5) years. Use a separate sheet of paper if necessary.

OFFENSE	DATE	LOCATION	COMMENTS

□Yes □ No