



All applications should be submitted to:
PRAIRIE LAND ELECTRIC COOP., INC.
 ATTN: HUMAN RESOURCES
 14935 US HIGHWAY 36 - P.O. BOX 360
 NORTON, KANSAS 67654-0360

APPLICATION FOR EMPLOYMENT

Prairie Land Electric is an Equal Opportunity Employer. We welcome you as an applicant for employment. Prairie Land Electric endeavors to make a dedicated effort to comply with all applicable laws prohibiting discrimination. All information will be considered personal and confidential. We appreciate your interest.

GENERAL	NAME (LAST)	(FIRST)	(MIDDLE)	DATE OF APPLICATION / /		
	ADDRESS WHERE YOU CAN BE CONTACTED			AREA CODE and TELEPHONE NO. ()		
	CITY, STATE and ZIP CODE			EMAIL ADDRESS		
	Are you over 18 years of age? Yes <input type="checkbox"/> No <input type="checkbox"/>			May we text or call you via cell?		
	Are you legally entitled to work in the United States? Yes <input type="checkbox"/> No <input type="checkbox"/>			TEXT <input type="checkbox"/>	CALL <input type="checkbox"/>	NO <input type="checkbox"/>
	Are you related to any Prairie Land employee(s) or Board Member? Yes <input type="checkbox"/> No <input type="checkbox"/>			**List any relative - spouse, child, grandchild, parent, grandparent, sibling, aunt, uncle, niece, nephew, including adoptive, step, or in-law relationships.		
	If yes, please provide: (Name)		(Relationship)			
Have you been convicted of a felony? Yes <input type="checkbox"/> No <input type="checkbox"/> (Conviction will not necessarily disqualify an applicant from employment, but will only be considered in relation to specific job requirements.)						
JOB INTEREST	Position for which you are applying					
	DATE AVAILABLE	SALARY REQUIREMENT		Are you willing to travel if a job requires? Yes <input type="checkbox"/> No <input type="checkbox"/>		
	What days and hours are you available to work?			Are you willing to relocate? Yes <input type="checkbox"/> No <input type="checkbox"/>		
	Previously employed by Prairie Land Electric.					
	Yes <input type="checkbox"/>	From	To	Position		
No <input type="checkbox"/>						
EDUCATION	SCHOOL	NAME AND LOCATION OF SCHOOL	COURSE OF STUDY	NO. OF YEARS COMPLETED	DID YOU GRADUATE?	DEGREE OR DIPLOMA
	HIGH					
	COLLEGE					
	OTHER					
	Describe any other specialized training or skills.					

List employment starting with your most recent position. May we contact your present employer? Yes No

Past employer? Yes No Please indicate if you were employed under a different name.

EMPLOYMENT HISTORY	PRESENT OR LAST EMPLOYER	COMPANY NAME			POSITION TITLE		
		ADDRESS			STARTING DATE	LEAVING DATE	
		NAME OF SUPERVISOR		TELEPHONE		SALARY STARTING	FINAL
		DESCRIBE YOUR WORK			REASON FOR LEAVING		
	PREVIOUS EMPLOYER	COMPANY NAME			POSITION TITLE		
		ADDRESS			STARTING DATE	LEAVING DATE	
		NAME OF SUPERVISOR		TELEPHONE		SALARY STARTING	FINAL
		DESCRIBE YOUR WORK			REASON FOR LEAVING		
	PREVIOUS OR LAST EMPLOYER	COMPANY NAME			POSITION TITLE		
		ADDRESS			STARTING DATE	LEAVING DATE	
		NAME OF SUPERVISOR		TELEPHONE		SALARY STARTING	FINAL
		DESCRIBE YOUR WORK			REASON FOR LEAVING		
OTHER EMPLOYMENT	COMPANY NAME	ADDRESS	POSITION TITLE	FROM	DATES TO	SALARY	

Use this space for comments or information not covered elsewhere.

PLEASE READ THE FOLLOWING PARAGRAPHS CAREFULLY BEFORE SIGNING THIS APPLICATION

The statements on this application are true and complete. I authorize the company to verify any information stated on this application. I understand that if I am employed, any misrepresentation or omissions of facts called for is cause for dismissal. I agree to submit to a physical examination, including a drug test. I will comply with all rules and regulations of this corporation that are in effect now and any others that may be instituted at a later date and I will follow all health and safety regulations, including the use of safety equipment at all times on the job.

I understand that this employment application and any company documents are not contracts of employment, and that any individual who is hired may voluntarily leave employment upon proper notice, and may be terminated by the employer at any time and for any reason. I understand that any oral or written statements to the contrary are hereby expressed disavowed and should not be relied upon by any prospective or existing employee.

I understand that , with my authorization, an investigation may be made whereby information is obtained regarding my character, previous employment, general reputation, educational background, credit record and/or criminal history, subject to applicable federal, state and/or local laws.

_____ DATE

_____ SIGNATURE OF APPLICANT