APPLICATION FOR EMPLOYMENT



RUTHERFORD ELECTRIC MEMBERSHIP CORPORATION

P.O. Box 1569 ♦ Forest City, North Carolina 28043 Telephone Number (828) 245-1621 + 1-800-521-0920

AN EQUAL OPPORTUNITY EMPLOYER

| | | | | D | ATE | |
|--|---|----------------|--------------|-------------|------------|------------|
| POSITION(S) APP | LIED FOR | | | | | |
| NAME | | | | | | |
| (Last) |) | (First) | (1) | /liddle) | (Ma | iden Name) |
| ADDRESS | t) | | | | (0) () | (7:) |
| (Stree | t) | (C | ity) | | (State) | (Zip) |
| TELEPHONE (| | EMAIL ADDRESS: | | | | |
| OTHER NUMBER | WHERE YOU CAN B | E REACHED _ | | | | |
| | AN APPLICATION W E | | | | YES | _ NO |
| | EMPLOYED WITH R | | | YE | sn | 10 |
| SPOUSE OF AN E | ED IN ANY WAY TO A MPLOYEE OR DIRE IF YES, PLEA | CTOR OF RUT | HERFORD EMC? | *Please see | note on la | |
| ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THIS COUNTRY? YESNO(PROOF OF U.S. CITIZENSHIP OR IMMIGRATION STATUS WILL BE REQUIRED IF EMPLOYED) | | | | | | |
| TYPE OF EMPLOY | MENT DESIRED: | FULL-TIME _ | PART-T | IME | _TEMPOR | ARY |
| PLEASE CIRCLE BELOW THE OFFICE IN WHICH YOU WISH TO WORK: | | | | | | |
| FOREST CITY | MORGANTON | MARION | LINCOLNTON | CHERRY | VILLE | GASTONIA |
| | | | | | | |
| NOTICE TO APPLICANTS | | | | | | |
| | | | | | | |

EQUAL EMPLOYMENT OPPORTUNITY

All applicants for employment with Rutherford EMC are considered and hired on the basis of qualifications, merit, and ability to perform work assignments; and without regard to race, color, religion, age, sex, national origin, disability (including physical or mental impairment), or any other legally protected status.

The employment practices of Rutherford EMC insure equal treatment of all employees, without discrimination in rates of pay or other terms and conditions of employment including opportunities for advancement, because of the employee's race, color, religion, age, sex, national origin or disability.

Education

SCHOOL

Address

Circle the highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 GED College 1 2 3 4 Graduate School 1 2 3 4

NAME & LOCATION

DATES

ATTENDED

MAJ/MIN

COURSE

DEGR

S/Q

HRS

GRAD?

Occupation

| High School | | | | | | | |
|--------------------------------------|-----------------------|---------------------|------------------------|--------------|-----------|-------------------|-------|
| College/University | | | | | | | |
| Graduate/Pro- fessional | | | | | | | |
| Other | | | | | | | |
| _IST fields of work | for which you | are licensed, regis | stered or certified, g | giving date(| (s) and s | source(s) of issi | uance |
| Military Service Were you in the U.S | Record S. armed force | s? Yes No | If yes, Brand | ch | | | |
| ACTIVE DUTY FRO | | | | | | | |
| Personal Refer | | | | 100 | | | |
| (Not relatives or f | ormer emplo | yers) | | | | | |
| Name | | | | Phon | ne | | |
| Address | Occupation | | | | | | |
| Name | | | | Phor | ne | | |
| Address | | | (| Occupation | | | |
| Name | Phone | | | | | | |
| | | | | 2 Ai | | | |

Employment History

| Current or Last Employer | | Address | | Telephone |
|--|-----------------|---------------------------------|------------------|--------------|
| Job Title | | Name & Title of Supervisor | | No. you Sup. |
| Date Employed (mo/yr) | Starting Salary | Ending Salary Reason for Leavin | | l ng |
| Date Separated (mo/yr) | Duties | | | |
| Full Time (# of yrs./mo) | | | | |
| Part Time (# of yrs/mo) | | | | |
| If part time, no. of hours worked per week | | | | |
| Current or Last Employer | | Address | | Telephone |
| Job Title | | Name & Title of Supervisor | | No. you Sup. |
| Date Employed (mo/yr) | Starting Salary | Ending Salary | Reason for Leavi | ng |
| Date Separated (mo/yr) | Duties | | | |
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| Date Employed (mo/yr) | Starting Salary | Ending Salary | Reason for Leavi | ing |
| Date Separated (mo/yr) | Duties | | | |
| Full Time (# of yrs./mo) | | | | |
| Part Time (# of yrs/mo) | | | | |
| If part time, no. of hours worked per week | | | | |

| Employment History (cont'd) | | | | | |
|--|-----------------|-----------------------|-----------------|--------------|--|
| Current or Last Employer | | Address | | Telephone | |
| Job Title | | Name & Title of Super | visor | No. you Sup. | |
| Date Employed (mo/yr) | Starting Salary | Ending Salary | Reason for Leav | ing | |
| Date Separated (mo/yr) | Duties | | | | |
| Full Time (# of yrs./mo) | | | | | |
| Part Time (# of yrs/mo) | | | | | |
| If part time, no. of hours worked per week | | | | | |
| | | | | | |
| Important - Please Read: | | | | | |
| *Rutherford Electric restricts the employment of certain relatives of employees and directors. | | | | | |

Certain positions require an employment entrance examination to determine physical and mental fitness as required to perform essential job functions.

All applicants offered a position with REMC must pass a pre-employment drug test and pre-employment alcohol test.

All applicants must submit to a criminal background check.

PLEASE READ CAREFULLY AND SIGN

(Application not valid unless signed)

It is understood and agreed that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from Rutherford EMC if I have been employed. Furthermore, I understand that just as I am free to resign at any time. Rutherford EMC reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of Rutherford EMC has the authorization to make any assurances to the contrary.

I authorize Rutherford EMC to make such investigation and inquiries as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquiries in connection with my application.

This application is current for only ninety (90) days. At the conclusion of this time, if I have not heard from Rutherford EMC and still wish to be considered for employment, it will be necessary for me to contact Rutherford EMC.

| Signature of Applicant | Date |
|------------------------|----------|
| Signature of Applicant | Date |

(NOTE: Applicants applying for positions that require them to drive Rutherford EMC vehicles must also fill out the Application Supplement for Position That Requires A CDL.