



MT. WHEELER POWER

1600 GREAT BASIN BLVD, ELY, NEVADA

POST OFFICE BOX 151000
ELY, NEVADA 89315-1000

TELEPHONE (775)289-8981
TELEFAX (775)289-8987

*****PLEASE READ BEFORE COMPLETING EMPLOYMENT APPLICATION*****

Mt. Wheeler Power, Inc. is an Equal Opportunity Employer. Our objective is to maintain a continuing policy of non-discrimination in employment. You will be considered for employment based upon your qualifications for the position for which you have applied. No question in this application is intended to illicit information in violation of any federal, state or local law, nor will any information obtained in response to any questions be used in violation of such law.

- This application for employment must be filled out with no omissions.
- You must apply for a current available position.
- The job title must be placed in "Position Applied For" area on the application.
- Your application will be considered only for the position which you apply, therefore; you must complete another application each time you wish to apply for another available position.
- You must sign and date the Certification of Agreement on Page 6 of the application.
- You must submit a completed application AND resume by the stated deadline.
- If you have any questions, please contact the Human Resource Department at the above number.

MT. WHEELER POWER, INC.

Employment Application

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation or any other legally protected status.

Position Applied For: _____

Full Time ___ Part Time ___ Temporary ___ Summer Only ___ Salary Desired _____

General Information

Name _____ Social Security _____ - _____ - _____

Mailing Address _____

Street or Box Number City State Zip

Telephone: Home _____ Work _____

- Yes ___ No ___ Do you have a valid driver's license? (A valid driver's license is a job-related requirement of some positions at Mt. Wheeler Power, Inc.)
- Yes ___ No ___ Are you related by blood or marriage to any present employee or a member of the Board of Directors of Mt Wheeler Power, Inc.? If yes, state the name(s), relationship(s) and position held by the person(s) to whom you are related. _____

- Yes ___ No ___ Have you ever been employed by Mt. Wheeler Power, Inc.? If yes, prove the dates of employment.
- Yes ___ No ___ Have you been convicted of a felony within the last 7 years? (Conviction will not necessarily disqualify an applicant from employment.) If yes, please explain: _____

- Yes ___ No ___ Are you currently employed?
- Yes ___ No ___ Are you currently on "lay-off" status and subject to recall?

Applicant understands they may be subject to physical examination to determine whether there is any medical reason the applicant could not perform the duties of the position. Any job offer is contingent on applicant passing all requirements of a physical as well as not testing positive for alcohol or illegal drug use.

Employment History

Fill out the following completely. Begin with present position held or last job held and work back. Use the comments area at the end of each section to account for any gaps in your employment. Include the last three employers or fifteen (15) years of employment.

Company: _____ Phone: _____ - _____ - _____
Street or Box _____ City _____ State _____ Zip _____
Employed-----From: _____ Month _____ Year To: _____ Month _____ Year
Start Earnings-----Base Wages \$ _____ Overtime \$ _____ Misc. \$ _____
Final Earnings-----Base Wages \$ _____ Overtime \$ _____ Misc. \$ _____
Please Explain Miscellaneous Earnings: _____

Last Position Held/Job Duties: _____

Name and Title of Supervisor: _____
Reason for Leaving: _____
Which part(s) of this job did you like best? _____
Why? _____
Which part(s) of this job did you like least? _____
Why? _____
May we contact this employer? (Please initial) _____ Yes _____ No---If "NO," please explain _____

Comments: _____

Company: _____ Phone: _____ - _____ - _____
Street or Box _____ City _____ State _____ Zip _____
Employed-----From: _____ Month _____ Year To: _____ Month _____ Year
Start Earnings-----Base Wages \$ _____ Overtime \$ _____ Misc. \$ _____
Final Earnings-----Base Wages \$ _____ Overtime \$ _____ Misc. \$ _____
Please Explain Miscellaneous Earnings: _____

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Why? _____
May we contact this employer? (Please initial) _____ Yes _____ No---If "NO," please explain _____

Comments: _____

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Please Explain Miscellaneous Earnings: _____

Last Position Held/Job Duties: _____

Name and Title of Supervisor: _____
Reason for Leaving: _____
Which part(s) of this job did you like best? _____
Why? _____
Which part(s) of this job did you like least? _____
Why? _____
May we contact this employer? (Please initial) _____ Yes _____ No---If "NO," please explain _____

Comments: _____

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Street or Box _____ City _____ State _____ Zip _____
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Final Earnings-----Base Wages \$ _____ Overtime \$ _____ Misc. \$ _____
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Name and Title of Supervisor: _____
Reason for Leaving: _____
Which part(s) of this job did you like best? _____
Why? _____
Which part(s) of this job did you like least? _____
Why? _____
May we contact this employer? (Please initial) _____ Yes _____ No---If "NO," please explain _____

Comments: _____

Additional Information

Please add any additional information you feel is relevant in helping us consider you for employment, other qualifications, specialized skills, and/or any job-related training received, in the United States Military. _____

Certification of Agreement

***** PLEASE READ THE FOLLOWING CAREFULLY, THEN SIGN AND DATE THE APPLICATION. *****

If you have any questions regarding these statements, please ask before signing.

1. It is understood this application is not an obligation to provide employment. It is our policy that all persons interested in employment complete a written application for a position which has been advertised or posted. A resume alone is not sufficient to consider an individual as an applicant. Individuals will not be considered applicants if you exclude information, specifically: 1) the position applied for and the date, 2) information required by law including social security number and immigration status, 3) a complete employment history including the name of the employer, dates of employment, rate of pay and reason for leaving.
2. I certify that the answers given herein are true and complete to the best of my knowledge. It is understood and agreed that any exclusion of required information, misrepresentation or falsification by me in this application may be considered sufficient cause for cancellation of this application and/or termination of my employment, if hired.
3. I hereby understand and acknowledge that unless otherwise defined by applicable law, any employment relationship with this company is of an "at will" nature, which means that I may resign at any time and that the company may discharge me 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 representative of the company. Furthermore, I understand that just as I am free to resign at any time, Mt. Wheeler Power, Inc. reserves the right to terminate my employment at any time, with or without cause or prior notice. I understand that no representative of Mt. Wheeler Power, Inc. has the authority to make any assurances to the contrary.
4. I authorize the thorough investigation of my work history and earnings, and verification of all data provided in my application for employment, related papers, or oral interviews. I authorize such investigation and I release from liability any person giving or receiving any such information. I understand that falsification of data so given or other derogatory information discovered as a result of this investigation may disqualify my application or, if hired, may subject me to immediate termination.
5. Although management makes every effort to accommodate individual preferences, business may at times make the following conditions mandatory: overtime, or a work schedule that includes Saturday and Sunday. I understand and accept these as conditions of employment, if hired.
6. Per Cooperative Policy No. 5.3, I agree to sign a "Release of Medical Information" form. I agree to undergo a medical examination, if requested by the employer, which I must successfully pass before finally being accepted for employment and also agree that, in the event I shall be employed by Mt. Wheeler Power, Inc., I will agree to further medical examination when requested by Mt. Wheeler Power,

Inc. If hired, medical information is placed in the employee's secured confidential file.

- 7. I understand this application will be considered active for a period of 90 days from the date indicated below. I further understand that if I am not hired during that period, I must complete and execute a new application form to be considered for employment.**

- 8. In the event that I am hired, I will abide by all of Mt. Wheeler Power, Inc. rules, regulations, policies and practices and understand that these may be changed from time to time at the discretion of Mt. Wheeler Power, Inc.**

Signature of Applicant _____ **Date** _____

Education and Training

Name and Address of School (City and State)	Circle Last Grade Completed	Major/Field Of Study	List Diploma or Degree
Last High School	9 10 11 12		
Jr. College/College/University	1 2 3 4		
Jr. College/College/University	1 2 3 4		
Technical/Vocational School	1 2 3 4		
Additional Training or Self-Improvement Classes			

Personal Data

Are you legally able to be employed in the U.S. Yes No. The Immigration Reform and Control Act of 1987 requires employers to hire only U.S. Citizens and lawfully authorized workers. You will be required as part of the application process to provide any employment verification mandated by the Federal Government.

Are you 18 or older? Yes No. If under 18, state your age: _____.

The following conditions may be required at some point in job assignment. If required, would you be willing to work the following:

Work schedule including Saturday and/or Sunday Yes No. Holidays: Yes No.

Overtime on: Saturday and/or Sunday Yes No. Evenings: Yes No.

Would you be willing to travel if required? Yes No.

When are you available to begin work? _____

References

Please list references that you would have no objection to Mt. Wheeler Power, Inc. contacting.

- | | | |
|----|------|-------|
| 1. | Name | Phone |
| 2. | Name | Phone |
| 3. | Name | Phone |