

Oakdale Electric Cooperative (OEC) is an equal opportunity provider and employer. No information provided here will be used in an unlawful manner.

Instructions:					
<ol> <li>Complete using black ink.</li> <li>Answer each question.</li> <li>Read and sign page 4.</li> </ol>					
Position Applied for:					
<b>GENERAL INFORM</b>	ATION				
Last Name	First Name	Middle Name			
Mailing Address	City	State Zip Code			
Home Phone Number	Cell Phone Number (Optional)	Work Phone Number (Optional)			
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🗌 Yes 🗌 No 🛛 Are you und	der the age of 18?				
	Do you have a valid driver's license? (A valid driver's license is a job-related requirement of some positions at Oakdale Electric Cooperative.)				
	Are you related by blood or marriage to any of the following persons: an employee of Oakdale Electric Cooperative; or a member of the Oakdale Electric Cooperative Board of Directors?				
	If the answer is "yes," state the name(s), relationship(s), and position(s) held by the person(s) to whom you are related.				
application	Are you legally eligible for employment in the United States? You will be required as a part of the application process to provide any employment eligibility verification mandated by the federal government.				
	Have you ever been employed by Oakdale Electric Cooperative? If yes, provide dates of employment.				

EMPLOYMENT HISTORY				
Provide your employment information requested below. Begin with your present or most recent employment. Use the <b>Other Information</b> section (page 3) to complete your employment history if necessary.				
Employer Name and Address:	Job Title:			
	Describe the work you did:			
Phone Number:				
Type of Business:				
Starting Salary:	From: (month/year)	To: (month/year)		
Ending Salary:	Reason for Leaving:			
Name of Supervisor:				
Supervisor's Phone Number:				
Employer Name and Address:	Job Title:			
	Describe the work you did:			
Phone Number:				
Type of Business:				
Starting Salary:	From: (month/year)	To: (month/year)		
Ending Salary:	Reason for Leaving:			
Name of Supervisor:				
Supervisor's Phone Number:				
Employer Name and Address:	Job Title:			
	Describe the work you did:			
Phone Number:				
Type of Business:				
Starting Salary:	From: (month/year)	To: (month/year)		
Ending Salary:	Reason for Leaving:			
Name of Supervisor:				
Supervisor's Phone Number:				
May we contact the employers listed above?				
If no, indicate which employer(s) we should not contact:				

EDUCATION AND TRAINING				
Indicate all schools that			1	
	High School	Vocational/Technical	College/University	Graduate School
School Name and Address				
Did you graduate?	Yes No	Yes No	Yes No	Yes No
Diploma/Degree and Year Graduated				
Major Course(s) of Study				
Other Post High School Courses Completed				
<b>SPECIALIZED TRAINING OR SKILLS:</b> List personal computer training, computer literacy, welding certification, special licenses (e.g. CDL), etc., that you possess that pertain to the position for which you are applying.				
SERVICE IN THE A	ARMED FORCES (or	otional)		
Branch of Armed Forces:				
General Duties/Training:				
OTHER INFORMA	TION			

APPLICANT AUTHORIZATION (Read carefully and initial each paragraph before signing.)				
	I certify that the facts contained in this application and/or resume for employment at Oakdale Electric Cooperative are true and complete to the best of my knowledge. I understand that any misrepresentations, falsifications, and/or deliberate omissions identified now or in the future may result in my immediate dismissal.			
	I authorize investigation of all statements herein. I also authorize by my signature below or a copy thereof, the organizations and individuals referred to herein to furnish information to the Cooperative. I may not assert in any forum that the Cooperative is liable to me should it, in processing this employment application, rely on information provided from these sources, even if the information provided is inaccurate or erroneous.			
	I understand that as a part of being considered for employment by Oakdale Electric Cooperative, I will be required to undergo a physical examination which will include urine testing for drugs. (Certain positions also require testing for alcohol.)			
	Additionally, I understand that nothing contained in this employment application or in the granting of an interview or in any policies, procedures or handbooks that I might receive, is intended to create an employment contract between Oakdale Electric Cooperative and myself. No promises regarding employment have been made to me at this time, and I understand that no such promise or guarantee is binding upon the Cooperative.			
Signed:	Date:			
In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, veteran status, non-job related				

disability, or any other protected group status.



## **Oakdale Electric Cooperative**

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