



**Jackson
Energy
Authority**

One thing you can count on.

CO-OP Application

"Jackson Energy Authority is an Equal Opportunity Employer"

Important Instructions:

1. This application is part of the examining process and any false or incomplete information may be grounds for disqualification.
2. Proof of education may be required in connection with this application.
3. Applicants will be considered for employment without regard to race, gender, religion, national origin, physical disability, or age.
4. Only candidates identified to continue in the selection process will be contacted.

PERSONAL INFORMATION	Last Name		First Name		MI	
	Permanent Address		City/State		Zip	
	Current/School Address (if different from above)		City/State		Zip	
	Social Security #		Home Phone		Cell Phone	
	US Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No		If No, Visa <input type="checkbox"/> Yes <input type="checkbox"/> No			
	Do you have a valid driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No		Driver's License #		Type/Class	State
	Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you willing to work overtime? <input type="checkbox"/> Yes <input type="checkbox"/> No			
	Type of co-op position for which you are applying (please be specific): _____					
	Do you have any relatives currently employed by Jackson Energy Authority? <input type="checkbox"/> Yes <input type="checkbox"/> No					
	Due to Nepotism Policy, please list name(s) and relationship to you. (A relative is defined as a person who is connected with another or others by blood or marriage.) _____					
Have you ever been employed by Jackson Energy Authority? <input type="checkbox"/> Yes <input type="checkbox"/> No						
If yes, please include position, dates employed and name used if different from above: _____						

REFERENCES	List the name, address, and phone number of three references who are not related to you.		
	NAME	ADDRESS	PHONE

Have you taken the ACT or SAT? ☐ Yes ☐ No

If so, what was your score? _____

EDUCATION	Name of School City and State	Diploma or Degree Type	Major or Field of Study	Completed? Yes/No	If No, Anticipated Date?

EMPLOYMENT RECORD INFORMATION	<p>Starting with your present or most recent job, list and describe fully the jobs you have had during the past ten years. A resume may be attached to the application; however, the major responsibilities of each job must be described on the application form.</p>	
	<p>1. Present Employer _____ From _____ To _____</p>	
	<p>Address _____ Telephone Number _____</p>	
	<p>Name and title of supervisor _____ Salary \$ _____ per _____</p>	
	<p>State job title and describe your most important duties and responsibilities _____</p>	
	<p>Reason for leaving or considering change _____</p>	
	<p>May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No (ALL OTHER LISTED EMPLOYMENT IS SUBJECT TO INVESTIGATION)</p>	
	<p>2. Employer _____ From _____ To _____</p>	
	<p>Address _____ Telephone Number _____</p>	
	<p>Name and title of supervisor _____ Salary \$ _____ per _____</p>	
<p>State job title and describe your most important duties and responsibilities _____</p>		
<p>Reason for leaving or considering change _____</p>		
<p>3. Employer _____ From _____ To _____</p>		
<p>Address _____ Telephone Number _____</p>		
<p>Name and title of supervisor _____ Salary \$ _____ per _____</p>		
<p>State job title and describe your most important duties and responsibilities _____</p>		
<p>Reason for leaving or considering change _____</p>		

Agreement

Please read carefully before signing.

I hereby apply for employment with Jackson Energy Authority and state that the information contained in this application is true to the best of my knowledge and belief. I understand and agree that any misrepresentation or false statement by me in connection with this application will constitute justifiable cause for Jackson Energy Authority not to employ me or if employed, to terminate my employment.

I understand and agree that all information furnished in this application may be verified by Jackson Energy Authority. I hereby authorize all individuals and organizations named or referred to in this application and any law enforcement organization to give Jackson Energy Authority all information relative to such verification and hereby release such individuals, organizations and Jackson Energy Authority from any and all liability for any claim or damage resulting there from.

I understand that to be considered for a position in customer service that requires the handling of cash and/or payments, I may be asked to provide written consent for Jackson Energy Authority to obtain a consumer report and/or an investigative consumer report including information concerning my credit and indebtedness. I understand that employment by Jackson Energy Authority is conditional upon my passing a drug test. I further understand that if a job offer is made to me, prior to commencing employment, that I will submit to a physical examination, if requested. If employed, I understand there may be occasions during my employment when Jackson Energy Authority may require me to submit to a physical examination subject to the requirements of the Americans with Disabilities Act. Such examinations will be performed by doctors designated by Jackson Energy Authority and at the Authority's expense. I hereby authorize such doctors to furnish the results of such examinations to Jackson Energy Authority.

I understand that nothing contained in this employment application or in the granting of an employment interview is intended to create an employment contract between the Authority and the applicant. In the event that an employer-employee relationship is established, it is understood that my employment is terminable-at-will without specific reason or cause by either the Authority or me at any time and is of no specific duration.

I understand that if I am employed by Jackson Energy Authority and as a condition of my continued employment by the Authority, I will be required to furnish proof of age and U.S. citizenship (or legal entry into the U.S., as the case may be). I understand that I will be expected to execute certain agreements with Jackson Energy Authority. I further understand that any policy of the Authority is subject to unilateral change without notice.

PLEASE sign your completed application. An unsigned application will not be considered.

Signature of Applicant _____ Date _____