



PO Box 6, Hwy 5 West Columbus, ND 58727  
 Phone: 701.939.6671 – Fax: 701.939.6666 – Toll Free: 800.472.2983

Thank you for your interest in employment with Burke-Divide Electric. When this completed application is returned, it will be held on file for six months and reviewed as job vacancies occur. This form was designed for persons applying for various types of positions. Some questions may not completely apply to your situation, but we ask that you answer the questions to the best of your ability.

## Employment Application

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address Apartment/Unit #

\_\_\_\_\_  
City State ZIP Code

Phone: ( ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Date Available: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Desired Salary: \$ \_\_\_\_\_

Position Applied for: \_\_\_\_\_

Are you eligible to work in the United States? YES  NO  Proof of citizenship or immigration status will be required.

Have you ever worked for this company? YES  NO  If so, when? \_\_\_\_\_

Do you have any relatives employed by BDEC, or on the Board of Directors? YES  NO  If yes, please list name and relationship of each relative: \_\_\_\_\_

Have you ever been convicted of a felony? YES  NO  If yes, explain: \_\_\_\_\_

### Education

TYPE OF SCHOOL	NAME, CITY, STATE	DIPLOMA/DEGREE	MAJOR/PROGRAM
HIGH SCHOOL			N/A
COLLEGE OR UNIVERSITY			
OTHER SCHOOL OR TRAINING ORGANIZATION			

### References

Please list three professional references.

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_

**Previous Employment**

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

**Military Service**

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_

**Disclaimer and Signature**

*I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

*Burke-Divide Electric Cooperative, Inc. is an Equal Opportunity Employer and prohibits discrimination based on race, color, religion, sex, national origin, age, disability or genetic information.*

*Burke-Divide Electric Cooperative, Inc. is a smoke-free workplace per N.D.C.C 23-12-9 to 23-12-11.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_