



89 W Bruce St
Harrisonburg VA 22801
540-434-5361
www.harrisonburgelectric.com

NOTICE TO APPLICANTS
Screening tests for alcohol and illegal drug use will be required before hiring and randomly during your employment here.

EMPLOYMENT APPLICATION

Date: _____

Personal Information

Full Name: _____ SSN: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

In case of emergency notify: _____ Phone: _____

General Information

Position desired _____ Hourly Rate expected: _____

Can you work: Full time Part Time Temporary Other/Summer

Are you on lay-off and subject to recall? Yes No

Will you work overtime if required? Yes No

Will you travel if job requires it? Yes No

Are you over age 18? Yes No

Do you have relatives employed at Harrisonburg Electric Commission? Yes No

If Yes, list names and how related _____

Have you ever been employed by Harrisonburg Electric Commission? Yes No

If Yes, list dates of employment _____

Are you a U.S. Citizen or eligible to work in the U.S. on a full-time basis? Yes No

If No, provide the following: Alien Registration No. _____

Type of Visa held _____

Proof of Employability will be required if you are offered Employment.

What Languages do you speak and write: _____

Have you ever been bonded? Yes No If Yes, for what job(s): _____

Have you ever served in the armed forces? Yes No Branch of Service: _____

Dates of Service: _____ Rank at Discharge: _____

Were you Honorably Discharged? Yes No

Background Information

Have you ever been convicted of any crime (excluding traffic violations)? Yes No

If Yes, Date: _____ Conviction: _____

Place: _____ Court: _____

Explain: _____

Are you currently out on Bail, the subject of a current warrant for your arrest or released on your own recognizance pending trial? Yes No

Education

Schools Attended	Name and City/State of School	From Mo/Yr	To Mo/Yr	Major Field of Study	Did you Graduate?
High School					
College					
Graduate					
Trade/Technical					
If GED, date Obtained: _____					

Former Employers (most recent first)

Dates of Employment	Name/Address of Employer	Salary	Position	Reason for Leaving
From: _____ To: _____				
From: _____ To: _____				
From: _____ To: _____				

References (please exclude relatives)

Name	Address	Phone	Years Acquainted

Driving Record

Do you have a valid Virginia driver's license? Yes No License Number: _____

If no Virginia license, please state reason or give number and state where you are currently licensed: _____

Date of Birth: _____ CDL A CDL B

I authorize HEC to verify my driving record from the Department of Motor Vehicles. _____ (initial)

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed; falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice and without cause.

Harrisonburg Electric Commission is an Equal Opportunity Employer.

Signature: _____ Date: _____

Email: _____

Interviewed by _____ Date: _____

Remarks: _____

Neatness: _____

Hired: Yes No Position: _____ Dept: _____

Salary/Wage: _____ Date Reporting to Work: _____

General Manager: _____ Dept. Manager: _____