

Tri-State Electric, Ltd.

Employment Application

AN EQUAL OPPORTUNITY EMPLOYER

It is the policy of the Company to provide employment opportunities without regard to race, color, religion, sex, sexual orientation, national origin, age, disability, or veteran status or gender identity.

APPLICATION FOR EMPLOYMENT

IMPORTANT: Please fill in your response above each line unless otherwise indicated. All answers must be printed or typed. Answers that are illegible or incomplete may prevent us from considering your application.

APPLICANT INFORMATION

Full Name: _____
First *Middle* *Last*

Address: _____
Street Address *City* *State* *Zip Code*

Phone: (____) _____ E-mail Address: _____

Drivers License Number: _____ Issuing State: _____ Expiration Date: _____

Date Available: _____ Social Security Number: _____

Are you a citizen of the United States? YES NO

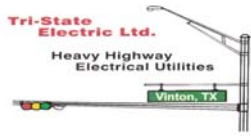
If no, are you authorized to work in the U.S.? YES NO

Are you a U.S. service veteran? YES NO

Race.- Please mark one White Black/African American Asian

American Indian or Alaskan Native Native Hawaiian or Other Pacific Islander

Ethnicity.- Please mark one Hispanic or Latino Not Hispanic or Latino



EMERGENCY CONTACT INFORMATION

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____
Street Address City State Zip Code

POSITION INFORMATION

Position Applied for: _____

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

Are you willing to relocate? YES NO

Referral Source: (advertisement, firm, school - specify): _____

How soon following notification can you report? _____

Are any relatives, including in-laws, employed at the company? YES NO

If yes, give name, relationship, position and location: _____

Have you previously applied for employment at the company? YES NO

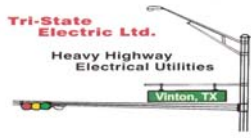
If yes, when? _____ For what position? _____

Have you previously been interviewed by the company? YES NO

If yes, when? _____ For what position? _____

Have you ever been suspended, placed on probation, resigned, discharged or terminated from any employment? YES NO

If Yes, Please Explain: _____



EDUCATION INFORMATION

High School: YES NO

College: YES NO

Trade School: YES NO Specialty _____

Other Degrees or Special Training: _____

EMPLOYMENT HISTORY: (Important! Starting with your present or most recent employer, list in consecutive order your last four employers, assignments or volunteer activities, including military experience. Please explain any gaps in employment.)

Company: _____ Phone: _____

Address: _____
Street Address City State Zip Code

Job Title: _____

Starting Salary: _____ Ending Salary: _____ Supervisor: _____

From: _____ To: _____ Reason for Leaving: _____

Responsibilities: _____

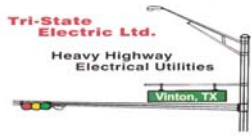
May we contact your current/previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____
Street Address City State Zip Code

Job Title: _____

Starting Salary: _____ Ending Salary: _____ Supervisor: _____



From: _____ To: _____ Reason for Leaving: _____

Responsibilities: _____

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

Company: _____ Phone: _____

Address: _____
Street Address City State Zip Code

Job Title: _____

Starting Salary: _____ Ending Salary: _____ Supervisor: _____

From: _____ To: _____ Reason for Leaving: _____

Responsibilities: _____

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

Company: _____ Phone: _____

Address: _____
Street Address City State Zip Code

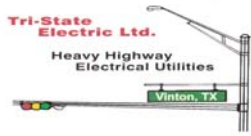
Job Title: _____

Starting Salary: _____ Ending Salary: _____ Supervisor: _____

From: _____ To: _____ Reason for Leaving: _____

Responsibilities: _____

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



REFERENCES

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____
Street Address City State Zip Code

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____
Street Address City State Zip Code

Full Name: _____ Relationship: _____

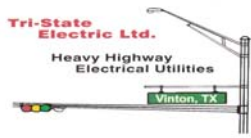
Company: _____ Phone: _____

Address: _____
Street Address City State Zip Code

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____
Street Address City State Zip Code



APPLICANT'S CERTIFICATION AND AGREEMENT

I HEREBY CERTIFY that my answers to the foregoing questions are true and complete and that I have not knowingly withheld any facts, circumstances or other information. I understand that honesty and integrity are important requirements of any employment with this company. I further understand that any false or misleading statement or omission of pertinent information will result in the rejection of my application, or in dismissal if discovered subsequent to my employment.

I HEREBY AUTHORIZE the Company to request, and I ALSO AUTHORIZE AND REQUEST each former employer, school attended, and each person, firm, or corporation given as references above, to furnish at any time, any information which may be sought concerning me and my work habits, character or skill, and any other data required, whether in connection with this application or for purposes of complying with surety company requirements or otherwise.

I HEREBY AFFIRM that by submitting this application I agree to submit to medical evaluations and/or examinations, including tests for the presence of illegal drugs or alcohol, prior to and during employment, within a time period prescribed by the Company and as often as directed during employment.

I HEREBY AUTHORIZE the medical examiner to disclose to the Company any and all findings and conclusions arrived at in any examination performed either prior to employment or during employment.

I UNDERSTAND that if I am employed, the terms and conditions of my employment will be governed by this application and the Company's Terms of Employment and Policy and Procedures, as amended from time to time by the Company.

I, the applicant whose signature is affixed hereto, and the Company mutually agree and contract that any and all claims or disputes arising out of or in any way relating to this application for employment, or the Company's decision to hire or not to hire me, including but not limited to claims for violation of any state or federal statutory, constitutional or common law shall be exclusively and finally resolved by binding arbitration administered according to the employment dispute procedures of the American Arbitration Association pursuant to the provisions of the Federal Arbitration Act.

Signature _____

Date _____

Thank you for completing this application. It will remain under consideration for one year. It will not be necessary for you to reapply during this one year period. Your interest is appreciated.