



Application for Employment

Southwest Generation is an equal employment opportunity employer and will not discriminate against any employee or applicant based on race, color, national origin, sex, sexual orientation, gender identity, religion, age, disability, protected veteran status, genetic information or any classification protected by Federal, State or local law. We are an Affirmative Action Employer, Veterans, Disabled. It is our intention that all qualified applicants are given equal opportunity and that selection decisions be based on job-related factors.

Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough room on this application. **PLEASE PRINT**, except for your signature on the back of the application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

GENERAL

Last Name: _____ First Name: _____ Middle Initial _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone No: _____ Today's Date: _____

Position Applied For: _____

What type of employment are you seeking? Full time Part Time Temporary

When are you available to start work? _____
Date

Are you 18 years of age or older? Yes No

(If you are hired, you may be required to submit proof of age)

If hired, can you furnish proof you are eligible to work in the U.S.? Yes No

Have you applied previously at Southwest Generation? Yes No

Were you ever employed at Southwest Generation? Yes No

How did you hear about us?

Newspaper _____ Southwest Generation Website _____ Other Website: _____

Employee Name: _____ Other: _____

Have you ever been convicted of any law violation? **(Include any plea of "guilty" or "no contest". Exclude minor traffic violation). (CA APPLICANTS ONLY: Exclude all marijuana related convictions more than two (2) years old).** Yes No

If "yes", provide details:

(A conviction will not necessarily disqualify an applicant for employment)

If employed, do you expect to be engaged in any additional business or employment outside of our job? Yes No

If "yes", provide details:

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EDUCATION

	List Name and Addresses of Schools	Number of Years Completed	Diploma/Degree Certificate
High School or GED		_____	_____
College or University		_____	_____
Vocational or Technical		_____	_____

SPECIAL SKILLS

What skills or additional training do you have that are related to the job for which you are applying?

What machines or equipment can you operate that are related to the job for which you are applying?

For Driving Jobs Only: Do you have a valid driver's license?

Yes

No

Driver's License Number: _____ Class of License: _____ State Licensed In: _____

Have you had your driver's license suspended or revoked in the last 3 years?

Yes

No

If "yes", provide details:

List professional, trade, business or civic activities and offices held. (**Exclude labor organizations and memberships which reveal race, color, religion, national origin, sex, age, disability, or other protected status.**)

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EMPLOYMENT HISTORY

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, provide firm name and supply business references.

Note: A job offer may be contingent upon acceptable references from current and former employers.

Name, Address, Phone Number of Employer

Company Name: _____ Employer's Phone #: _____

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

Job Title: _____ Employed from: _____ to _____

Starting Salary: _____ Ending Salary: _____ Supervisor's Name: _____

Job Duties:

Reason for Leaving:

May we contact this employer?

Yes

No

Company Name: _____ Employer's Phone #: _____

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

Job Title: _____ Employed from: _____ to _____

Starting Salary: _____ Ending Salary: _____ Supervisor's Name: _____

Job Duties:

Reason for Leaving:

May we contact this employer?

Yes

No

Company Name: _____ Employer's Phone #: _____

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

Job Title: _____ Employed from: _____ to _____

Starting Salary: _____ Ending Salary: _____ Supervisor's Name: _____

Job Duties:

Reason for Leaving:

May we contact this employer?

Yes

No

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Have you worked or attended school under any other names?

Yes

No

If "yes", provide name(s): Name(s): _____

Are you presently employed?

Yes

No

If "yes", whom do you suggest we contact?

Name: _____

Phone Number: _____

Have you ever been fired from a job or asked to resign?

Yes

No

If "yes", please explain:

REFERENCES

Please list three professional references:

Name: _____ Title: _____ Phone Number _____

Name: _____ Title: _____ Phone Number _____

Name: _____ Title: _____ Phone Number _____

AFFIDAVIT, CONSENT AND RELEASE

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand I may be required to successfully pass a pre-employment and/or post-employment drug screen. I hereby consent to a pre-employment and/or post-employment drug screen as a condition of employment, if required.

I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE PRESIDENT OF THE ORGANIZATION HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE PRESIDENT AND THE EMPLOYEE. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.

I have read, understand, and by my signature consent to these statements.

Signature: _____ Date: _____