



Renville Sibley CO-OP Power

EMPLOYMENT APPLICATION

PLEASE PRINT

Name: _____ Date: _____

Address: _____ Main Number: (____) _____

City: _____ State: _____ Zip Code: _____ Mobile Number:(____) _____

Position desired: _____ Desired Pay: _____

When would you be available to begin work? _____

Are you legally eligible to be employed in the United States? YES NO

(Proof of identity and eligibility will be required upon employment)

Are you over the age of 18 years? YES NO

(If no, you may be required to provide authorization to work.)

Have you ever worked for this Company before? YES NO

If yes, When? (Give dates) _____ Job Title: _____

Do you have any relatives or friends who work for the Company? YES NO

Are you available to work: DAYS NIGHTS WEEKENDS

| Day | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|-------|--------|--------|---------|-----------|----------|--------|----------|
| From: | | | | | | | |
| To: | | | | | | | |

Are you presently employed? YES NO If yes, may we contact your employer? YES NO

If presently employed, why are you considering leaving?

Do you belong to any professional, trade, business or civic organizations that would deal with the position for which you are applying? YES NO

If yes, please explain and list offices held: (Omit any organization which reflects your race, color, religion, age, sex, sexual orientation, marital status or disabilities.)

EDUCATION

| | Name and Location of School | Course of Study and GPA | No. of Years Completed | Diploma or Degree Received |
|----------------------------|-----------------------------|-------------------------|------------------------|----------------------------|
| High School | | | | |
| College | | | | |
| Vocational or Trade School | | | | |
| Graduate Work | | | | |

Have you completed any special courses, seminars and/or training that would enable you to perform the position for which you are applying? YES NO If yes, please describe:

List academic honors, extracurricular activities, offices held, etc. in high school or college: (Omit any which reflects your race, color, religion, age, sex, sexual orientation, marital status or disabilities.)

United States Military or Naval Service: _____ **Rank:** _____

Dates of Service: _____ **Honorable Discharge?** _____

Active National Guard or Reserves? Yes No **Dates** _____

EMPLOYMENT Start with your present or most recent position

| | | |
|--|-------------------|-----------------------------|
| Name of Employer | | Telephone Number () |
| Full Address (Including Street, City, State & Zip) | | Supervisor's Name and Title |
| Most Recent Job Title | | |
| From Month/Day/Year | To Month/Day/Yea | Reason for Leaving: |
| Describe the Work Performed | | |
| Name of Employer | | Telephone Number () |
| Full Address (Including Street, City, State & Zip) | | Supervisor's Name and Title |
| Most Recent Job Title | | |
| From Month/Day/Year | To Month/Day/Year | Reason For Leaving: |
| Describe the Work Performed | | |
| Name of Employer | | Telephone Number () |
| Full Address (Including Street, City, State & Zip) | | Supervisor's Name and Title |
| Most Recent Job Title | | |
| From Month/Day/Year | To Month/Day/Year | Reason for Leaving: |
| Describe the Work Performed | | |

PERSONAL REFERENCES Give three references (not relatives or employers)

| | |
|--|-----------------------------------|
| Name | Occupation |
| Full Address (Including Street, City, State & Zip) Street _____ City _____ State _____ Zip _____ | Telephone Number () Email: |
| Name | Occupation |
| Full Address (Including Street, City, State & Zip) Street _____ City _____ State _____ Zip _____ | Telephone Number () Email: |
| Name | Occupation |
| Full Address (Including Street, City, State & Zip) Street _____ City _____ State _____ Zip _____ | Telephone Number () Email: |

Applicants will receive consideration for positions, without regard to race, color, religion, age, gender, sexual orientation, marital status, individuals with disabilities, and equally to disabled veterans and veterans of the Vietnam era.

This institution is an equal opportunity provider and employer.

IMPORTANT, PLEASE READ AND SIGN

I understand that the omission of pertinent and relevant information or giving false or misleading information by me on any part of this Application for Employment can be grounds for termination from the company or its' subsidiaries. I understand that if I am hired, my employment is for no definite time and may be terminated at any time without prior notice.

Signed: _____

Do not write below this line

RESULTS

Employed: YES NO

If Yes, Job Title: _____ Department _____

Date beginning Employment _____ Compensation \$ _____ per _____

Supervisor: _____ I-9 Completed?: _____