

**EAST CENTRAL IOWA COOPERATIVE
EMPLOYMENT APPLICATION**



Location _____ Department _____

East Central Iowa Cooperative considers applicants for all positions without regard to race, color, national origin, age, marital or veteran status, the presence of disability, or any other legally protected status. ECIC is an Equal Opportunity Employer.

Personal Information

Please Print

Last Name First Name Middle Name

Driver's License (State) _____ Driver's License (Number) _____

Current Address Number Street City State Zip Code

Telephone Number(s) _____ Social Security # _____

Are you at least 18 years of age and can you provide

Required proof of age after hiring? Yes _____ No _____

The Age Discrimination in Employment Act prohibits discrimination on the basis of age With respect to individuals who are at least 40 years of age.

Have you ever worked for this company? Yes _____ No _____

If yes, give date and location: _____

Reason for leaving: _____

On what date would you be available for work? _____

Name any relative working for ECIC. _____

Can you travel if job requires it? Yes _____ No _____

Can you, at any time of employment, submit verification

of your legal right to work in the United States? Yes _____ No _____

Have you ever been convicted of a crime other than a minor

traffic violation? Yes _____ No _____

NOTE: a conviction will not necessarily bar you from employment as each conviction will be assessed with respect to the time, circumstances, and seriousness as they relate to your employment. If yes, please explain on a separate sheet of paper.

Employment Application Form (Page 2)

Position Applying For: _____

Full Time _____ Part Time _____ Salary/Wage Desired: _____

Are you currently employed? Yes _____ No _____

If yes, may we contact employer? Yes _____ No _____

Explain: _____

How did you learn about us? Advertisement _____ Employment Agency _____ Friend _____

Relative _____ Walk-In _____ Other _____

Education

High School _____ Location _____

Did you graduate? Yes _____ No _____

College _____ Location _____

Did you graduate? Yes _____ No _____

Major _____

Trade/Business/Graduate School _____

Location _____ Did you graduate? Yes _____ No _____

Major _____

Indicate Equipment You Can Operate: PC _____ Calculator _____ Typewriter _____ Fax _____

PBX/Switchboard _____ Copy Machine _____

Indicate Programs You Can Work With: Lotus _____ Word Perfect _____ Power Point _____

Excel _____ Other _____

Why are you interested in becoming an employee with East Central Iowa Cooperative?

List any special job-related skills and qualifications acquired from employment or other experiences:

Employment Application Form (Page 3)

Employment History—*past ten years, list most recent first*

Company Name _____ Supervisor _____

Address _____ Telephone # _____

Responsibilities _____

Dates of Employment: From _____ To _____

Reason for Leaving _____

Starting Wage \$ _____ Ending Wage \$ _____

Company Name _____ Supervisor _____

Address _____ Telephone # _____

Responsibilities _____

Dates of Employment: From _____ To _____

Reason for Leaving _____

Starting Wage \$ _____ Ending Wage \$ _____

Company Name _____ Supervisor _____

Address _____ Telephone # _____

Responsibilities _____

Dates of Employment: From _____ To _____

Reason for Leaving _____

Starting Wage \$ _____ Ending Wage \$ _____

Company Name _____ Supervisor _____

Address _____ Telephone # _____

Responsibilities _____

Dates of Employment: From _____ To _____

Reason for Leaving _____

Starting Wage \$ _____ Ending Wage \$ _____

References: *Use back of form if necessary for additional information:*

Give name, address and telephone number of three references who are not related to you and who are familiar with your abilities and work ethic.

Applicant's Statement

I certify that the information provided by me on this Application Form is correct. I understand that the furnishing of any misleading or incorrect on this Application Form or its attachments will be just cause for termination should I become employed by East Central Iowa Cooperative, regardless of when or how discovered.

If hired for a position that required driving a company owned vehicle, a rental vehicle or my personal vehicle for company business, I authorize East Central Iowa Cooperative to obtain a Motor Vehicle Record report. East Central Iowa Cooperative's insurance company may also obtain a report through its sources. I understand that if the person I am applying for involves driving a motor vehicle, it is imperative that a good driving record exists.

It is agreed and understood that the company or its agents may investigate my background to ascertain any and all information of concern to my employment history. I also authorize any and all former employers listed on this Application Form to furnish any information regarding my job performance. I agree to hold my former employers and their agents harmless from all liability that could relate in any way to the disclosure of private information or an assessment or opinion of my suitability for employment.

I understand that my employment is for no fixed term. I understand that employment with East Central Iowa Cooperative is on an **at will basis** and my employment may be terminated with or without notice by me or the Company. I also understand that no employee, Officer or agent of the Company may bind it to anything contrary to the above by oral or printed statements, including handbook, benefit booklets or other forms of communication.

Signature of Applicant

Date

Administrative Use Only:

Schedule Interview Yes _____ No _____ Date/Time _____

Remarks _____

Employed Yes _____ No _____ Date of Employment _____

Job Title _____ Hourly Rate/Salary _____

Notes _____
