

SIOUXLAND ENERGY COOPERATIVE 3890 GARFIELD AVE SIOUX CENTER, IA 51250 PHONE (712) 722-4904 FAX (712) 722-3268

EMPLOYMENT APPLICATION

Print in ink or type. The entire form must be completed; a resume will not substitute. Keep a copy for your records.

Position Information			Applicar	nt Informati	on
Job Applied For	NAME				
How did you learn of this opening?	MAILING AI	MAILING ADDRESS			
Newspaper					
Siouxland Personnel Employment Department Posted At Plant	CITY, STATE, ZIP				
	HOME PHON	ΙE	WORK PI	HONE	CELL PHONE
	ARE YOU LE	GALLY AUTH	ORIZED TO	WORK IN THE U	J.S.?YesNo
Education and Formal	Training		other scho	and training (cols) to meet the	college, trades, e requirement in the
Do you have a high school diplor		Certificate?	?Y	esN	0
Name and Location of College, Trade School, Business School, etc. Major Graduated? Degree Est		P Degree Earned			
				•	•
Criminal History		The disclosure of a criminal record will not necessarily disqualify you for employment. Each conviction will be evaluated on its own merits with respect to time, circumstances seriousness, in relation to the job for which you are applying.			
Have you ever been convicted of, YesNo If yes, please explain the nature of	1 0		·		,
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	Skill Codes	
This section is to be completed if yo	ou are applying for any of the related positions.	
Check all skills, which you are fully proficient.		
Trade Skills	Computer Skills (please list)	
Welding		
Electrical		
Plumbing		
Please note any other skills that		
may qualify you for this position		

Describe enough work experience to meet the qualifications of the job announcement. List each job separately, even within the same organization. Include unpaid and volunteer work related to the job applied for. List your average number of hours worked per week; part-time work is prorated on a 40-hour workweek. You must complete this section; a resume will not substitute. You may make additional copies to attach to your application if necessary.

ii necessary.		
EMPLOYER	CITY & STATE	Your Title
FROM (MONTH AND YEAR)	To (Month and Year)	WAGE (HOURLY OR SALARY)
AVERAGE HOURS WORKED PER WEEK	SUPERVISORS NAME	SUPERVISORS PHONE NUMBER
SUPERVISORY/LEADWORK: CHECK THEAssigning/Reviewing WorkR	AREAS YOU WERE RESPONSIBLE FOR. Cating Work PerformanceHiring or re	ecommending Hiring
Handling disciplinary problemsR	desponding to grievancesWriting Pos	sition Descriptions
MAJOR DUTIES (BE SPECIFIC)		
EMPLOYER	CITY & STATE	YOUR TITLE
FROM (MONTH AND YEAR)	To (Month and Year)	WAGE (HOURLY OR SALARY)
AVERAGE HOURS WORKED PER WEEK	SUPERVISORS NAME	SUPERVISORS PHONE NUMBER
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Handling disciplinary problemsResponding to grievancesWriting Position Descriptions			
MAJOR DUTIES (BE SPECIFIC)			

I certify that all information given in this job application is true and complete to the best of my knowledge. I understand that any statement that is false, fraudulent or misleading may result in the rejection of my application, denial of employment, and dismissal from state service if discovered after employment.

SIGNATURE	DATE

"The following information is requested by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race/national origin of individual applicants on the basis of visual observation or surname."

Ethnicity:

Hispanic or I	Latino
Not Hispanio	or Latino

Race: (Mark one or more)

wnite	_ Black or African Amer	1can
American	Indian/Alaska Native	_Asian
Native Ha	waiian or Other Pacific	Islander

Cender.	1/1010	Female

You may mail this resume to: Siouxland Energy Cooperative 3890 Garfield Ave Sioux Center, IA 51250 Or Fax: 712-722-4818

Follow Up Can Be Directed To:

hr@siouxlandenergy.com 712-722-4904

Thank you for your interest in our company!