

Your Touchstone Energy[®] Cooperative *The power of human connections*

Employment Application

Position applying for:

EMPLOYEE INFORMATION

Name:				
Last		First	Middle	
Telephone:	Email:	Alternate telephone:		
Address:				
Are you able to perform the essential functions of the position with or without accommodations? Yes No I am legally eligible for employment in the U.S.? Yes No		If necessary for the job, I am able to: Work overtime? Yes No Provide a valid Iowa Driver's License? Yes No If so, fill out the following: Issuing state: Type:		
Are you related to any emp or member of the Board of If yes, please provide name	Directors? Yes No	Can you travel if the job I will be able to report I am hired.	o requires it?	

EMPLOYMENT HISTORY

List more recent employment first. Be sure all your experience or employers related to this job are listed here, in the summary following this section or on an extra sheet of paper if necessary. No more than 10 years history recommended.

Employer name and address	Position title/duties, skills:		Start date:	End date:
			Reason for leaving:	
Pay:_\$				
Per:	Supervisor:	Telephone:		
Employer name and address	Position title/duties, skills:		Start date:	End date:
			Reason for leaving:	
Pay:_\$	_			
Per:	Supervisor:	Telephone:		
Employer name and address	Position title/duties, skills:		Start date:	End date:
			Reason for leaving:	
Pay: \$				
Per:	Supervisor:	Telephone:		
Employer name and address	Position title/duties, skills:		Start date:	End date:
			Reason for leaving:	
Pay:_\$				
Per:	Supervisor:	Telephone:		

		EDUC	ATION		
	Institution name	Years completed	Field of stu	dy Gr	aduate or degree
High school					
College/university Business/technical					
Additional					
		MILI	TARY		
Are you a veteran? Duty/specialized trai	☐ Yes ☐ No ning:				
		SKILLS & QU/	ALIFICATIONS		
Other qualifications	such as special skills, abilit			red:	
Tupos of computers	coffuero and other equir	montvou ara a	ulified to operate		
Types of computers,	software, and other equip	oment you are qu	canned to operate:		
Professional licenses	, certifications or registrat	ions:			
Additional skills, inclute to the employer's at	uding supervision skills, ot tention:	her languages or	information regardi	ng the career/occupa	tion you wish to bring
Typing speed:	per minute Experie	nce with 10-key	adding machine	Yes	No
	convicted of a felony? [in, including what the felo		e felony took place a	nd how the case was	resolved:
•	convicted of a crime?		e crime took place a	nd how the case was i	resolved:
		REFER	ENCES		
List three personal re	eferences who are not rela	itives or former s	supervisors.		
Name	Address	Te	elephone	Occupation	Years known
Name	Address	Te	elephone	Occupation	Years known

Address

Employment Application

Occupation

Telephone

Years known

EMERGENCY CONTACT

In case of accident or illness, please contact: Name:_

Daytime phone:___

Address:

Relationship:

Date

INFORMATION TO THE APPLICANT

As part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. You may make a written request for information derived from the checking of your references. If necessary for employment, you may be required to: supply your birth certificate or other proof of authorization to work in the United States, have a physical examination and/or a drug test, or sign a conflict of interest agreement and abide by its terms. I understand and agree to the information shown below.

Signature of Applicant

Equal Employment Opportunity: While many employers are required by federal law to have an Affirmative Action Program, all employers are required to provide equal employment opportunity and may ask your national origin, race and sex for planning and reporting purposes only. This information is optional and failure to provide it will have no effect on your application for employment.