



# Kandiyohi Power Cooperative

Your Touchstone Energy® Partner 

## 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 organizations 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	
From Month/Day/Year	To Month/Day/ Year	Rate of Pay	Reason for Leaving
Describe the Work Performed			
Name of Employer		Telephone Number (    )	
Full Address (Including Street, City, State & Zip)		Supervisor's Name and Title	
From Month/Day/Year	To Month/Day/ Year	Rate of Pay	Reason for Leaving
Describe the Work Performed			
Name of Employer		Telephone Number (    )	
Full Address (Including Street, City, State & Zip)		Supervisor's Name and Title	
From Month/Day/Year	To Month/Day/ Year	Rate of Pay	Reason for Leaving
Describe the Work Performed			

Use an additional sheet of paper if more space is necessary.

**PERSONAL REFERENCES**

Give three references (not relatives of 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, sex, except where sex is a bonafide occupational qualification, sexual orientation, marital status, individuals with disabilities, and equally to disabled veterans and veterans of the Vietnam era.**

**IMPORTANT, PLEASE READ AND SIGN**

I understand that failure to reveal any prior employer, 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?: \_\_\_\_\_