



Your Touchstone Energy® Cooperative 

East Central Energy
PO Box 39 - 412 Main Avenue N.
Braham, Minnesota 55006-0039

EMPLOYMENT APPLICATION

Please type or print the answers to all questions completely and carefully.
If applicable, attach your resume to this application.

Date: _____

1. Type of work desired: _____

2. Your name _____

3. Your present address _____
Street City State ZIP

4. E-mail address _____

5. Your (residential) Telephone Number _____ Other (Business) Telephone Number _____

The best time to reach me is _____

5. Are you at least 18 years old? YES NO **Please see note at bottom of last page.*

6. Driver's license number: _____ State Issued: _____

NOTICE TO APPLICANTS OF EQUAL EMPLOYMENT OPPORTUNITY

All applicants for employment with East Central Energy are considered and hired on the basis of qualifications, merit, and ability to perform work assignments; and without regard to race, color, creed, religion, age, sex, national origin, veteran status, status with regard to public assistance, disability, sexual orientation, or marital status.

The employment practices of East Central Energy insure equal treatment of all employees, without discrimination in rates of pay or other terms and conditions of employment including opportunities for advancement, because of the employee's race, color, creed, religion, age, sex, national origin, veteran status, status with regard to public assistance, disability, sexual orientation, or marital status.

East Central Energy will make reasonable accommodations to the physical and mental limitations of an applicant unless such an accommodation would impose an undue hardship on the conduct of the business. The applicant must inform East Central Energy during the interview process of the need for an accommodation. When an accommodation has been requested, ECE will, in consultation with the applicant 1) discuss the essential functions of the job, 2) determine the precise job-related limitation(s), and 3) identify potential accommodations and assess the effectiveness of each. The applicant will be provided with a determination of their request within 14 days.

Record of Education

School	Name and Address of School	Major Course or Subject	Did You Graduate?	List Diploma or Degree
High School				
College or University				
Business College				
Correspondence School				
Other (Specify)				

Outline any experience and/or educational achievements, which would be an asset in this position. (Such as subjects of concentration, interests, activities, organization, and honors received).

Military Service Record

Were you in the U. S. Armed Forces YES NO

Active Duty YES NO Branch _____

Discharge Rank or Grade _____

List duties in Service, including special training _____

Personal References

Name _____ Phone _____

Address _____ Occupation _____

Name _____ Phone _____

Address _____ Occupation _____

Name _____ Phone _____

Address _____ Occupation _____

Name _____ Phone _____

Address _____ Occupation _____

Employment Information

PRESENT EMPLOYER (or most recent) _____ Kind of Business _____
 Address _____ Phone _____
 Starting date _____ Starting title _____ Starting wages _____
 Present date _____ Present title _____ Present wages _____
 Starting duties _____
 Present duties _____
 Last immediate supervisor's name and title _____
 What did you like best about this job? _____
 What did you like least about this job? _____
 Reason for leaving _____
 may we contact your present employer now without jeopardizing your position? _____

PREVIOUS EMPLOYER _____ Kind of Business _____
 Address _____ Phone _____
 Starting date _____ Starting title _____ Starting wages _____
 Final date _____ Final title _____ Final wages _____
 Starting duties _____
 Final duties _____
 Last immediate supervisor's name and title _____
 What did you like best about this job? _____
 What did you like least about this job? _____
 Reason for leaving _____

PREVIOUS EMPLOYER _____ Kind of Business _____
 Address _____ Phone _____
 Starting date _____ Starting title _____ Starting wages _____
 Final date _____ Final title _____ Final wages _____
 Starting duties _____
 Final duties _____
 Last immediate supervisor's name and title _____
 What did you like best about this job? _____
 What did you like least about this job? _____
 Reason for leaving _____

IF MORE THAN THREE PREVIOUS EMPLOYERS, LIST OTHERS HERE

Length of Employment	Company and Address	Position or Type of Work	Salary or Wage	Reason Leaving

To assist us in finding the proper position for you in our company, use the space below to summarize any additional information necessary to describe your full qualifications.

PLEASE READ CAREFULLY AND SIGN
APPLICANT'S CERTIFICATION AND AGREEMENT

If employed by East Central Energy, I agree to abide by its policies and practices. The preceding information is complete and true to my knowledge. If required, I agree to take a physical examination and provide whatever health history information as may be necessary and, further, the examining physician may disclose the findings to East Central Energy or its authorized agent. A physical examination will be done upon a conditional job offer.

I hereby authorize investigation of all statements contained in this application and I agree that if any misrepresentation or omission is made by me or if the results of an investigation are not satisfactory for any reason, any offer of employment made to me by East Central Energy may be terminated immediately without obligation or liability to me other than for payment, at the rate agreed upon, for service actually rendered if I have been employed. I authorize my previous employers and references to furnish any information required concerning my personal character, work habits or employment records. I release all such persons from liability or damages incurred as a result of inquiry and furnishing this information.

Additionally, I understand that nothing contained in the Employment Application or in the granting of an interview or in any policies, procedures, or handbooks that I may receive is intended to create an employment contract between ECE and me for employment for a specific duration. I acknowledge that the policies and practices of East Central Energy may be changed, interpreted, withdrawn, or added to by the company at any time and without prior notice. I further understand that no promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the company unless made in writing and signed by the General Manager. If an employment relationship is established, I understand that my employment and compensation may be terminated, with or without cause at any time at the option of either East Central Energy or myself.

Further, any representation made to me, either directly or indirectly, that may in any way limit the right of the company to terminate my employment at any time without notice for any reason, or that may constitute an expressed, or implied covenant of good faith and fair dealing, shall be void and unenforceable unless set out in writing and signed by the President/CEO of East Central Energy.

I understand that East Central Energy is a tobacco-free and drug-free workplace.

Applicant's Signature

Date

* Many of the jobs at East Central Energy are considered hazardous. We are prohibited by law from hiring anyone under age 18 for these jobs.

** East Central Energy restricts the employment of certain relatives of employees and directors.

Voluntary Affirmative Action Information

(Completion of information below is voluntary)

We consider applicants for all positions without regard to race, color, religion, age, sex, national origin, sexual orientation, veteran status, creed, disability, marital status or status with regard to public assistance.

Date: ____ / ____ / ____

POSITION APPLIED FOR: _____

APPLICANT'S NAME: _____
LAST FIRST MIDDLE

ADDRESS: _____
STREET CITY STATE ZIPCODE

PHONE: _____
AREA CODE NUMBER

As required, we comply with government regulations including Affirmative Action obligations where they apply.

In an effort to comply with requirements regarding government recordkeeping, reporting and other legal obligations, we ask that you complete this applicant data survey. Your cooperation is appreciated.

Please be advised that your survey is not a part of your official application for employment. It is considered confidential information that will not be used in any hiring decision.

CHECK ONE: Male Female

CHECK ONE OF THE FOLLOWING RACE/ETHNIC GROUP:

- AMERICAN INDIAN/ALASKAN NATIVE ASIAN BLACK OR AFRICAN AMERICAN
 HISPANIC OR LATINO NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
 WHITE MORE THAN ONE RACE

CHECK IF ANY OF THE FOLLOWING ARE APPLICABLE:

- VIETNAM VETERAN DISABLED VETERAN HANDICAPPED INDIVIDUAL

TO BE COMPLETED BY APPLICANT – NOT FOR INTERVIEW PURPOSES –
TO BE FILED SEPARATELY FROM APPLICATION