



Agwrx Cooperative
800 10th Street SW
Watertown, SD 57201
www.agwrxcoop.com

EMPLOYMENT APPLICATION

PERSONAL INFORMATION

Date: _____ Date of Birth: _____

Phone Number: (____) _____ Email Address: _____

Applicant Name: _____

Last

First

Middle

Address: _____

Street

City

State

Zip Code

Position(s) applying for: _____

Referred by (please provide the first and last name of the Agwrx employee and Agwrx location they are employed at): _____

Applicant Questions

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

If hired, can you provide proof of your identity and authorization to work in the United States? Yes No

Have you ever been convicted of a felony, misdemeanor or gross misdemeanor? Yes No

If yes, when? _____

*Conviction does not automatically disqualify; we consider when it occurred and how it relates to the job you are seeking.

Are you able to perform the "essential functions" of the job for which you are applying (with or without reasonable accommodation)? *This question is not designed to elicit information about an applicant's disability. Please do not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage to the extent permitted by law.

Yes No

Have you ever applied to Agwrx Cooperative? Yes No If yes, when? _____

Were you ever employed previously at Agwrx Cooperative? Yes No If yes, when? _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Can you travel if a job requires it? Yes No

Are you available to work: Full Time Part Time Shift Work Temporary

On what date would you be available to work? ____/____/____

Are you currently on "layoff status" and subject to recall? Yes No

EDUCATION

What is your highest level of education completed? _____

Diploma/Degree: _____

School Name and Location: _____

Describe Course of Study: _____

EMPLOYMENT HISTORY

Start with your present or last job, include any military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap, or other protected status.

Last or current employer:

Employer: _____

Phone Number: (____) _____

Address: _____

Street

City

State

Zip Code

From ____/____/____ to ____/____/____

Position Held: _____

Work Performed: _____

Reason for Leaving: _____

Employer: _____

Phone Number: (____) _____

Address: _____
Street City State Zip Code

From ____/____/____ to ____/____/____

Position Held: _____

Work Performed: _____

Reason for Leaving: _____

Special Skills and Qualifications:

Summarize special job-related skills and qualifications acquired from employment or other experience:

REFERENCES

Give name, address, and telephone number of three references who are not previous employers:

1. _____
2. _____
3. _____

Application Statement

I certify that I have read and understand the questions and the information requested in this application, and that the answers and information that I have provided are true and complete to the best of my knowledge. I authorize investigation of all statements and references contained in this application as may be necessary for Agwrx Cooperative to make employment decisions. I understand that false, misleading or incomplete information given in my application or in an interview(s) may result in the Company no longer considering my application; and termination of my employment if the Company discovers such information after my employment has begun.

If I receive an offer of employment, I understand that it will be for an indefinite term. The employment relationship would be at will.

Signature of Applicant _____

Date _____

Agwrx Cooperative is an equal employment opportunity employer ("EEO"). Agwrx Cooperative has a policy to make hiring and other employment decisions as an EEO employer without regard to race, color, religion, sex, national origin, ancestry, creed, age, disability, or any other status protected by applicable law. Lance Trucking, Inc. provides reasonable accommodations to a qualified person with a disability, unless such accommodations would pose an undue hardship to the Company. Please feel free to let staff know if you need accommodation to complete this application and any other part of the application process, or to perform the essential functions of the position that you are seeking.

Applications that are not completed thoroughly will not be considered. Please return completed applications to Agwrx's main office in Watertown or scan a copy and send to: admin@agwrxcoop.com.

Please contact Rob Goens, Agwrx COO, with any questions at 605-886-3039.

Thank you for your interest in Agwrx Cooperative.