



P.O. Box O
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 Bagley, MN 56621-1001
 Phone (218) 694-6241
 Toll-free 1-888-694-3833
 Fax (218) 694-6245

EMPLOYMENT APPLICATION

Position applying for:	Date of application:
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PERSONAL DATA			
Name (last, first, middle):			
Street and/or mailing address:	City:	State:	Zip:
Primary Contact Phone #: <input type="checkbox"/> (Home) <input type="checkbox"/> (Mobile)	Secondary Contact Phone #: <input type="checkbox"/> (Home) <input type="checkbox"/> (Mobile)		
Date available to start:	Salary desired:	Do you have a high school diploma or GED <input type="checkbox"/> Yes <input type="checkbox"/> No	
Email address:	Do you have a valid Minnesota Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, is it a Commercial Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you authorized to work in the U.S. on an unrestricted basis? <input type="checkbox"/> Yes <input type="checkbox"/> No			
POSITION INFORMATION			
How did you learn about this position?	Have you previously been employed by Clearwater-Polk Electric Cooperative? <input type="checkbox"/> Yes. Last date of employment was _____ <input type="checkbox"/> No		
Hours: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Status: <input type="checkbox"/> Regular <input type="checkbox"/> Temporary		
Are you able to perform the essential functions of this position? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, what accommodations are needed?			
Are you related to any Clearwater-Polk Electric Cooperative employee or board member? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what is the employee or board member's name?			

Clearwater-Polk Electric Cooperative, Inc. places great emphasis on member service, teamwork, problem solving, and innovation. We look for people who exemplify these qualities and are willing to work hard for our membership. Clearwater-Polk Electric Cooperative, Inc. is an equal opportunity employer and recruits, advertises, employs, promotes, transfers, disciplines, and discharges without regard to race, color, religion, national origin, age, sex, marital status, ancestry, physical or mental disability, or veteran status.

EMPLOYMENT HISTORY Start with your present or most recent employment and work back. Use separate sheet if necessary. (INCLUDE PAID AND UNPAID POSITIONS)

Job Title #1:	Start Date (mo/day/yr):	End Date (mo/day/yr):
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Company Name:	Supervisor's Name:	Phone Number:
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City:	State:	Zip:
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Position:	Duties:
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Reason for leaving (if applicable):

May we contact your present employer? Yes No N/A

Job Title #2:	Start Date (mo/day/yr):	End Date (mo/day/yr):
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Company Name:	Supervisor's Name:	Phone Number:
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City:	State:	Zip:
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Position:	Duties:
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Reason for Leaving:

Job Title #3:	Start Date (mo/day/yr):	End Date (mo/day/yr):
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Company Name:	Supervisor's Name:	Phone Number:
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City:	State:	Zip:
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Position:	Duties:
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Reason for Leaving:

Job Title #4:	Start Date (mo/day/yr):	End Date (mo/day/yr):
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Company Name:	Supervisor's Name:	Phone Number:
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City:	State:	Zip:
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Position:	Duties:
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Reason for Leaving:

QUALIFICATIONS Please list any education or training you feel relates to the position applied for that would help you perform the work, such as schools, colleges, degrees, vocation or technical programs, and military training.

	School Name	Degree	Address/City/State
School:			
School:			
Other:			

PROFESSIONAL CERTIFICATIONS AND LICENESSES Please list any professional certifications and licenses that you have been awarded.

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COMPUTER SKILLS AND SOFTWARE PROGRAMS Please list any computer skills and software programs that you have experience with and that you feel would help you in the position that you are applying for.

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SPECIAL SKILLS List any special skills or experience that you feel would help you in the position that you are applying for (leadership, organizations/teams, other, etc.).

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REFERENCES Please list three professional references not related to you, with full name, address, phone number, and relationship. If you don't have three professional references, then list personal, unrelated references.

Name	Address/City/State	Phone	Relationship

Affidavit (Please read carefully)

Nonbinding Application and Interview Process: I understand that this application will be reviewed, but nothing in this application or any other documents or in the employment evaluation process shall be construed as either an offer or contract of employment or an obligation on the part of Clearwater-Polk Electric Cooperative, Inc., to provide any benefit to me.

Employment-At-Will: I understand that my employment and compensation can be terminated with or without cause, and with or without notice, at any time, at the option of either Clearwater-Polk Electric Cooperative, Inc. or myself.

I hereby declare that my statements on this application and on my resume or documents provided by me to Clearwater-Polk Electric Cooperative, Inc. are true and correct to the best of my knowledge. I acknowledge and agree that providing any false information may result in a decision to not hire me, or if hired, may result in the termination of my employment. I also authorize investigation of these statements. This investigation may include employment history, reasons for leaving previous employment, criminal record, driving record, social security number investigation, and degree/certificate verification. I hereby release Clearwater-Polk Electric Cooperative, Inc. from all liability for any damages resulting from the information obtained. This application shall be considered active for a period of one year.

Applicant signature

Date