



APPLICATION FOR EMPLOYMENT

Please provide complete and legible information. An incomplete application may affect your consideration for employment. If necessary, attach a separate sheet for additional information.

Wild Rice Electric Cooperative, INC. is committed to equal employment opportunity and will not discriminate against an applicant or employee based on race, color, religion, creed, national origin or ancestry, sex, pregnancy or childbirth, marital status, familial status, sexual orientation, status with regard to public assistance, membership or activity in a local commission, age, physical, sensory or mental disability, veteran or military status, genetic information, gender identity, or any other legally recognized protected basis under federal, state, or local law. The information collected by this application is solely to determine suitability for employment, verify identity, and maintain employment statistics on applicants.

Applicants with disabilities may be entitled to reasonable accommodation under the terms of the Americans with Disabilities Act, the Minnesota Human Rights Act, and other state or local laws. A reasonable accommodation is a change in the way things are normally done which will ensure an equal employment opportunity without imposing undue hardship on the employer. Please inform us if you need assistance completing this application or to otherwise participate in the application process.

Your application will be active for 60 days. If you are not hired during that time period but wish to continue to be considered for available positions, you must complete a new application.

GENERAL INFORMATION

Full Name _____			Date _____	
FIRST	MIDDLE	LAST		
Address _____				
STREET		CITY	STATE	ZIP CODE
Contact Number (____)		Date available for work _____		
Alternate Contact Number (____)		Email (optional) _____		
Are you legally authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Do you now, or will you in the future, require immigration sponsorship for work authorization (e.g., H-1B)? <input type="checkbox"/> Yes <input type="checkbox"/> No				
(If hired, verification will be required consistent with federal law.)				
Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No				
(If no, you may be required to provide authorization to work.)				
Do you have a driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Operator <input type="checkbox"/> Commercial (CDL)				
Driver's license number _____		State of issue _____		Expiration date: _____

POSITION INFORMATION

Position applied for: _____

Applying for: ☐ Full-time ☐ Part-time ☐ Seasonal/Temporary

EDUCATION

Type of School	School Name and Location	Number of Years Completed	Diploma, Degree, or Certificate Received	Course of Study or Major
High School (or G.E.D. equivalent)				
College or University				
Graduate School				
Vocational or Trade School				
Other				

BACKGROUND INFORMATION

During the past ten years, have you ever been discharged, suspended, or asked to resign from any position?

☐ Yes ☐ No If yes, please explain. _____

For the purpose of verifying information on this application, have you ever worked or attended school under a different name at any of the organizations you have listed? ☐ Yes ☐ No If yes, specify name. _____

REFERENCES

List three professional references that we may contact:

Name _____	Telephone No. (____) _____
Email Address _____	Type of Acquaintance _____
Name _____	Telephone No. (____) _____
Email Address _____	Type of Acquaintance _____
Name _____	Telephone No. (____) _____
Email Address _____	Type of Acquaintance _____

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EMPLOYMENT RECORD

List all employment experience for the past ten years, starting with the most recent or present employer, including US military service or training. Using a separate section for each position, describe in detail all work experience including periods of unemployment. **You may include as part of your employment history any verifiable work performed on a volunteer basis. Resumes may not be substituted in lieu of completing the following employment information.**

Current Employer _____ Geographic Location _____ Your Position _____ Supervisor's Name/Title _____ May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, why? _____ Primary responsibilities _____ _____	Phone (____) _____ From _____ Month Year To _____ Month Year
Employer _____ Geographic Location _____ Your Position _____ Supervisor's Name/Title _____ Primary responsibilities _____ _____	Phone (____) _____ From _____ Month Year To _____ Month Year
Employer _____ Geographic Location _____ Your Position _____ Supervisor's Name/Title _____ Primary responsibilities _____ _____	Phone (____) _____ From _____ Month Year To _____ Month Year
Employer _____ Geographic Location _____ Your Position _____ Supervisor's Name/Title _____ Primary responsibilities _____ _____	Phone (____) _____ From _____ Month Year To _____ Month Year

How did you learn about this position? Check all that apply:

- ☐ Our website ☐ Recruiter ☐ Word of mouth ☐ Other
- ☐ Careers website or job board (Monster, Indeed, CareerBuilder, etc.) ☐ Social media (LinkedIn, Facebook, etc.)

Have you worked for us before?

☐ Yes ☐ No If yes, when? _____ Job title: _____

Relatives of current employees or board members may not be employed by the cooperative when the employment would create a conflict of interest. If you receive a conditional offer of employment, you may be asked to identify any relative who is a current employee or board member of Wild Rice Electric Cooperative, INC. For purposes of this policy, “relative” is defined as any person who is related by blood or marriage, or whose relationship with the employee is similar to that of people who are related by blood or marriage.

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Have you signed or otherwise agreed to any non-solicitation, non-competition, or other similar post-employment restriction or agreement with your current or any prior employer? ☐ Yes ☐ No If yes, explain:

**PLEASE READ CAREFULLY AND INITIAL EACH PARAGRAPH BEFORE
SIGNING**

I understand, where permissible under applicable federal, state, and local law, I may be subject to a pre-employment drug test after receiving a conditional offer of employment, and must receive a negative result for illegal drug use before being permitted to commence work with Wild Rice Electric Cooperative, INC.

_____ Initials

I understand, where permissible under applicable federal, state, and local law, I may be subject to a pre-employment medical examination after receiving a conditional offer of employment, and must meet the qualifications for the position, with or without reasonable accommodation, before being permitted to commence work with Wild Rice Electric Cooperative, INC.

_____ Initials

I understand, where permissible under applicable federal, state, or local law, I may be subject to a pre-employment background check after receiving a conditional offer of employment to investigate my criminal background, driving record, credit history and other matters related to my suitability for employment. I understand that a separate disclosure and consent form will be provided to me prior to any background check.

_____ Initials

I understand employment with Wild Rice Electric Cooperative, INC. is also contingent on my providing sufficient documentation necessary to establish my identity and eligibility to work in the United States.

_____ Initials

I authorize Wild Rice Electric Cooperative, INC. and its representatives to contact my current and former employers (with the exception of my current employer, if I have marked "May we contact?" on page 3/ of this application as "No"), schools, references, and other persons or organizations I have named in this application for the purpose of verifying the information I have provided. I release my current and former employers, schools, references, and other persons or organizations named in this application from any liability resulting from the information released. I authorize employers, schools, and other persons or organizations named in this application to provide any information or transcripts requested.

_____ Initials

I hereby certify that, if employed, my employment with Wild Rice Electric Cooperative, INC. will not conflict with, violate, breach, or result in default under, any contract, agreement, or understanding that I am a party to or am bound by, including any non-solicitation, non-competition, or other similar post-employment restriction or agreement I have with any current or former employer, other than the contracts, agreements, covenants, or understandings I have disclosed in this application, if any.

_____ Initials]

I understand and agree that, if hired, my employment will be at will, which means employment is for an indefinite period of time and may be terminated by myself or Wild Rice Electric Cooperative, INC. at any time, with or without cause, and with or without notice.

_____ Initials]

I certify that all of the above information is true and complete and I understand that any falsification or omission of information made by me may disqualify me from further consideration for employment or, if hired, may result in my termination at any time during the period of my employment, regardless of the amount of time that has passed.

_____ Initials

Note: An offer of employment is conditioned upon complying with Wild Rice Electric Cooperative's requirements including, but not limited to, signing a separate disclosure and consent form prior to any background check.

MY SIGNATURE IS EVIDENCE THAT I HAVE READ AND AGREE WITH THE ABOVE STATEMENTS.

Applicant's signature _____

Date _____

Voluntary Applicant Survey Form

An Equal Opportunity, Affirmative Action Employer

Last name	First name	Middle initial(s)
<hr/>		
Date	Position(s) for which you are applying	

Please read carefully (voluntary disclosure): As an affirmative action employer, we must monitor our equal employment opportunity and affirmative action program, and report these results to government agencies. If you choose not to provide some or all of this information, you will not be subject to any negative or adverse treatment. The information you provide is completely voluntary and will only be used to monitor our compliance with equal opportunity laws and regulations. * When we receive this form, we will immediately place it in a confidential file separate from your application. If you wish, you may mail this form to us separately.

Race/Ethnicity – Select one or more

- ☐ American Indian or Alaskan Native: A person having origins in any of the original peoples of North, South or Central Americas, and who maintains tribal affiliation or community attachment.
- ☐ Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia or Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
- ☐ Black or African American: A person having origins in any of the black racial groups of Africa.
- ☐ Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South, Central American or other Spanish culture or origin, regardless of race.
- ☐ Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- ☐ White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- ☐ Do not wish to answer

Disability – Are you a person with a disability?

- ☐ Yes
- ☐ No
- ☐ Do not wish to answer

Sex/Gender – Select one

- ☐ Woman
- ☐ Man
- ☐ Non-Binary/Transgender/Gender Non-Conforming
- ☐ Do not wish to answer

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