



An Equal Opportunity Employer

WE ARE A DRUG FREE WORK PLACE

P.O. Box 1166	1775 S. Central Ave.	P.O. Box 1379	2639 Belknap Ave.	863 Road 8
Williston, ND 58802	Sidney, MT 59270	Miles City, MT 59301	Billings, MT 59101	Powell, WY 82435
(701) 572-0767	(406) 488-8066	(406) 234-2309	(406) 248-4418	(307) 754-7204

EMPLOYMENT APPLICATION

PERSONAL DATA

Today's Date: _____ Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Driver's License Number: _____ Issuing State: _____ Expiration Date: _____

Do you have a CDL (commercial driver's license)? Yes or No

If applying for Sax Electric please check which one applies to you:

License type: Master Journeyman Apprentice None

License number and state(s): _____

Other Professional Licenses: _____ State Issued: _____ Date Issued: _____ No: _____

In Case of Emergency Notify: Name: _____ Phone Number: _____

EMPLOYMENT DESIRED

Position: _____ Date You Can Start: _____ Salary/Hourly Desired: _____

Type of Employment Desired: Full Time Part-time Temporary Seasonal

Available for: Weekend Holidays Rotating Shifts On-Call

Do you have relatives employed by Agri? Yes No If yes, Name of Relative: _____

Are you employed now: Yes or No If so, may we inquire of your present employer? Yes or No

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

If yes, please explain: _____

A "yes" answer will not automatically disqualify you from employment. Rather, such factors as age and date of conviction, seriousness, and nature of the crime as it relates to specific occupational categories and rehabilitation will be considered.

Are you a veteran of military service? Yes or No

EDUCATION

CIRCLE HIGHEST SCHOOL GRADE COMPLETED: 8 9 10 11 12

Do you have a degree outside of high school: Associates Bachelors Masters Doctorate

Name of school attended for degree: _____

Date completed: _____ Major: _____ Vocational Training: _____

WORK EXPERIENCE (Applicants with CDL's List Last 10 Years of Employers-All Others List Last 3 Years)

Company Name: _____ Address: _____

Job Description (duties, skills, vehicles & equipment used): _____

Dates of employment: Start: _____ End: _____ Starting Wage: _____ Ending Wage: _____

Reason for leaving: _____ Phone Number: _____

Were you subject to FMCSA while employed at this employer? Yes or No Supervisor's Name: _____

Was this job designated as a safety sensitive function subject to alcohol & controlled substance testing? Yes or No

Company Name: _____ Address: _____

Job Description (duties, skills, vehicles & equipment used): _____

Dates of employment: Start: _____ End: _____ Starting Wage: _____ Ending Wage: _____

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Have you ever had a motor vehicle permit or license denied, revoked, or suspended? Yes or No If yes please explain below:

Have you ever refused to take or failed a pre-employment or any other type of drug test in the past 3 years? Yes or No

If yes please explain: _____

List any traffic violations, other than parking, or accidents you have been involved in during the past 3 years. Specify date & nature of each, if none please state NONE:

ADDITIONAL INFORMATION

Skills and Qualifications. Summarize any training, skills, and areas of specialization or major interest that may qualify you as being able to perform job-related functions in the position for which you are applying. Include any health care, business, or industrial equipment operated.

REFERENCES

Work References:

Name/Job Title	Company/Address	Phone Number
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Personal References (not related):

Name	Address	Phone Number
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

I certify that all information I have provided to apply for and secure work with Agri Industries, Inc. is true, complete, and correct. If any information provided by me is found to be false, incomplete, or misrepresented in any respect, it will be sufficient cause to cancel further consideration of this application, or immediately discharge me from Agri Industries, Inc. service, whenever it is discovered.

I expressly authorize Agri Industries, Inc., and its agents, without reservation, to contact and obtain information from all references, employers, public agencies, licensing authorities, and educational institutions and to otherwise verify the accuracy of all information regarding me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding Agri Industries, Inc., or its agents for seeking, gathering, and using such information in the employment process and all other persons, corporations, or organizations for furnishing such information about me.

I understand that Agri Industries, Inc. does not unlawfully discriminate in employment, and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state, or federal law.

I understand that completion of this Application for Employment does not guarantee that Agri Industries, Inc. has employed me.

I certify that I have read, fully understand, and accept all terms of the foregoing Application Statement.

DATE: _____ SIGNATURE: _____