



GRANITE FALLS
ENERGY

Granite Falls Energy, LLC
15045 Highway 23 SE • PO Box 216
Granite Falls, MN 56241-0216
Telephone: 320-564-3100 Fax: 320-564-3190

Application for Employment

Today's Date: _____

Name: _____			
Last	First	MI	
Address: _____			
Street	City	State	Zip Code
Daytime Phone: _____		Evening Phone: _____	
E-mail Address: _____			

Position Information

Position(s) Desired: _____ Desired Salary: _____

Willing to Work: Full Time Part Time Shift Work

If the position requires, are you available for overtime? Are you willing to relocate? Yes No
 Yes No

Education Information

High School: _____

Years Completed: _____	Name & Location Graduated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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College/University: _____

Degree Earned? <input type="checkbox"/> Yes <input type="checkbox"/> No	Name & Location	If no, years completed: _____
Major: _____	Minor: _____	

Graduate Studies: _____

Degree Earned? <input type="checkbox"/> Yes <input type="checkbox"/> No	Name & Location	If no, years completed: _____
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Describe any specialized Training or Skills which may be relevant: _____

Special Skills or Training

Typing Wpm _____

Lab Experience

Grain/Agriculture Experience

Welding Type of Welding: _____

Mechanical Experience

Other Special Skills: _____

Computer & Software Used: _____

Employment History

Are you currently employed? Yes No

May we contact your most recent/current employer? Yes No

Complete the following section in detail, most recent employer or current employer first (include service in the Armed Forces of the United States, part time, summer employment, self employment, volunteer or temporary employment if applicable). It is not necessary to go back beyond 10 years.

Most Recent/Current Employer: _____
Address: _____ Phone Number: _____
(City, State, Zip)
Supervisor's Name: _____
Your Position: _____
Position Description: _____
Dates Employed: _____ To _____ Reason for Leaving: _____
Month/Yr. Month/Yr.
Starting Salary/Hourly Rate: _____ Ending Salary/Hourly Rate: _____

Most Recent/Current Employer: _____
Address: _____ Phone Number: _____
(City, State, Zip)
Supervisor's Name: _____
Your Position: _____
Position Description: _____
Dates Employed: _____ To _____ Reason for Leaving: _____
Month/Yr. Month/Yr.
Starting Salary/Hourly Rate: _____ Ending Salary/Hourly Rate: _____

Previous Employer: _____
Address: _____ Phone Number: _____
(City, State, Zip)
Supervisor's Name: _____
Your Position: _____
Position Description: _____
Dates Employed: _____ To _____ Reason for Leaving: _____
Month/Yr. Month/Yr.
Starting Salary/Hourly Rate: _____ Ending Salary/Hourly Rate: _____

Previous Employer: _____
Address: _____ Phone Number: _____
(City, State, Zip)
Supervisor's Name: _____
Your Position: _____
Position Description: _____
Dates Employed: _____ To _____ Reason for Leaving: _____
Month/Yr. Month/Yr.
Starting Salary/Hourly Rate: _____ Ending Salary/Hourly Rate: _____

List any professional, trade, business and civic or volunteer activities and any offices held. (You may exclude memberships which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.):

General Information

Do you have any relatives that are currently employed by Granite Falls Energy including employees, Board of Governors, ect.... Yes No
If Yes: With whom and what is your relationship? _____

If employment is offered, are you able to provide proof of the legal right to work in the U.S. after being hired? Yes No

Are you under the age of 18? Yes No

How did you hear about Granite Falls Energy, LLC?

Newspaper Walk in GFE Website Facebook Other Referred by GFE Employee-
Name: _____

Professional References

Please provide the names and business telephone numbers of people who are familiar with your work experience and technical competence in the field for which you are applying. We prefer professional/technical associates and/or past supervisors with who you have worked by providing reference information, you are giving the Granite Falls Energy, LLC permission to contact these people.

Name: _____ Title: _____
Business Telephone: _____ Employer: _____
Professional Relationship: _____ Years Associated: _____

Name: _____ Title: _____
Business Telephone: _____ Employer: _____
Professional Relationship: _____ Years Associated: _____

Name: _____ Title: _____
Business Telephone: _____ Employer: _____
Professional Relationship: _____ Years Associated: _____

Please read the following carefully before submitting this application:

By placing my signature on this Employment Application, I verify that all of the information that I have provided on this document is true and accurate as of _____. I understand that by providing false information on this application I have forfeited my possible employment with GFE and that I may be terminated if my failure to provide truthful information is discovered after I have begun my employment. Moreover, by signing this Employment Application I authorize GFE to contact my past employers, the education institutions I attended, and/or my references to investigate my background. I further authorize GFE to communicate the information contained within this Employment Application to third-parties. Finally, I understand that this Employment Application is the property of GFE and that if I am hired a copy of this document will be retained in my personnel file.

Applicant Signature: _____ Date: _____