

# LYON-LINCOLN ELECTRIC COOPERATIVE, INC.

P.O. Box 639 – West Highway 14  
Tyler, MN 56178

## APPLICATION FOR EMPLOYMENT An Equal Opportunity Employer

### PERSONAL

Name \_\_\_\_\_ Date \_\_\_\_\_  
last first middle

Present Address \_\_\_\_\_  
number street city state zip code

Home Telephone \_\_\_\_\_ Business Telephone \_\_\_\_\_

Are you at least 18 years of age?  Yes  No

Do you have the legal right to remain and work in the United States?  Yes  No

Type of Visa (if applicable) \_\_\_\_\_

Have you ever been convicted of any crime other than a minor traffic offense within the last five years?

No  Yes If yes, nature of crime, when, where, and disposition of case (conviction of a crime is not an automatic bar to employment). \_\_\_\_\_

### GENERAL

Position Applying for \_\_\_\_\_

Salary desired \_\_\_\_\_ Date available for work \_\_\_\_\_

How were you referred to this organization? \_\_\_\_\_

Have you ever worked for this organization before?  No  Yes

If yes, give details: Dates \_\_\_\_\_ Position \_\_\_\_\_

**This application is current only for thirty (30) days, at the conclusion of which time, if you have not heard from us and still wish to be considered for employment, it will be necessary for you to fill out a new application.**

## EMPLOYMENT HISTORY

### Most Recent or Present Employer

Name of Company \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Address \_\_\_\_\_ Phone (     ) \_\_\_\_\_  
Your Job Title and Duties \_\_\_\_\_  
\_\_\_\_\_  
Supervisor \_\_\_\_\_ Starting Pay \_\_\_\_\_ Ending Pay \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

### Next Previous Employer

Name of Company \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Address \_\_\_\_\_ Phone (     ) \_\_\_\_\_  
Your Job Title and Duties \_\_\_\_\_  
\_\_\_\_\_  
Supervisor \_\_\_\_\_ Starting Pay \_\_\_\_\_ Ending Pay \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

### Next Previous Employer

Name of Company \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Address \_\_\_\_\_ Phone (     ) \_\_\_\_\_  
Your Job Title and Duties \_\_\_\_\_  
\_\_\_\_\_  
Supervisor \_\_\_\_\_ Starting Pay \_\_\_\_\_ Ending Pay \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

### Next Previous Employer

Name of Company \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Address \_\_\_\_\_ Phone (     ) \_\_\_\_\_  
Your Job Title and Duties \_\_\_\_\_  
\_\_\_\_\_  
Supervisor \_\_\_\_\_ Starting Pay \_\_\_\_\_ Ending Pay \_\_\_\_\_  
Reason for leaving \_\_\_\_\_



## EDUCATION

	Name & Location	Course of Study	Did you graduate? If so, degree received.
High School			
College			
Trade/Technical School			
Other			

## MILITARY SERVICE

Branch of Service \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Rank at time of discharge \_\_\_\_\_

Description of duties \_\_\_\_\_

## CERTIFICATION

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct without any mental reservation whatsoever. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

I hereby authorize the Company to thoroughly investigate my references, work record, education and any other matters related to my suitability for employment and, further, authorize my former employers to disclose to the Company any and all of my employment records, including disciplinary reports and letters of reprimand, without giving me notice of such disclosure. In addition, I hereby release the Company, my former employers, their respective directors, officers, employees and agents, and all other persons from any and all claims, demands and liabilities arising out of or in any way related to such investigation or disclosure.

I understand and agree that if I am employed, my employment and compensation are for no definite or determinable period and may be terminated at any time, with or without cause and with or without notice, at the option of either myself or the Company. I further understand and agree that no representative of the Company has any authority to enter into any agreement, written or verbal, for employment for any specified period of time or to make any binding representation or agreements, contrary to the foregoing.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date