



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			
College/University: _____	Graduated?	Yes	No	
Degree Earned? _____	Yes	No	If no, years completed: _____	
Major: _____	Name & Location			
Graduate Studies: _____	Minor: _____			
Degree Earned? _____	Yes	No	If no, years completed: _____	
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: _____