



Highwater Ethanol, LLC
24500 U.S. Highway 14 - PO Box 96
Lamberton, MN 56152
Telephone: 507-752-6160 Fax: 507-752-6162

Application for Employment

Today's Date: _____

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

Position Information

Position(s) Desired:	_____	Desired Salary:	_____
Willing to Work:	<input type="checkbox"/> Full Time	<input type="checkbox"/> Part-Time	<input type="checkbox"/> Shift Work
If the position requires, are you available for overtime?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are you willing to relocate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Education Information

High School:	_____	Name & Location	_____
Years Completed:	_____	Graduated?	<input type="checkbox"/> Yes <input type="checkbox"/> No
College/University:	_____	Name & Location	_____
Degree Earned?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If no, years completed:	_____
Major:	_____	Minor:	_____
Graduate Studies:	_____	Name & Location	_____
Degree Earned?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If no, years completed:	_____
Describe any specialized Training or Skills which may be relevant: _____			

Special Skills or Training

<input type="checkbox"/> Typing	WPM	_____
<input type="checkbox"/> Lab Experience		
<input type="checkbox"/> Grain/Agriculture Experience		
<input type="checkbox"/> Welding	Type of Welding:	_____
<input type="checkbox"/> Mechanical Experience		
<input type="checkbox"/> 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 #: _____
City State Zip

Supervisor: _____ 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 #: _____
City State Zip

Supervisor: _____ 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 #: _____
City State Zip

Supervisor: _____ 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 #: _____
City State Zip

Supervisor: _____ 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 Highwater Ethanol including employees, Board of Governors, etc . . .	<input type="checkbox"/> Yes	<input type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you under the age of 18?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
How did you hear about Highwater Ethanol, LLC?		
<input type="checkbox"/> Highwater Ethanol Employee _____	(Please list)	
<input type="checkbox"/> Newspaper	<input type="checkbox"/> Radio	<input type="checkbox"/> Walk In
<input type="checkbox"/> Internet	<input type="checkbox"/> Other	

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 Highwater Ethanol, 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 HWE 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 HWE to contact my past employers, the education institutions I attended, and/or my references to investigate my background. I further authorize HWE to communicate the information contained within this Employment Application to third-parties. Finally, I understand that this Employment Application is the property of HWE and that if I am hired a copy of this document will be retained in my personnel file.

Applicant Signature: _____	Date: _____
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