

Applicant's Name

Last

First

Middle Initial



APPLICATION FOR EMPLOYMENT

CHS Inc. is an Equal Employment Opportunity Employer. It is the policy of CHS Inc. to recruit, hire, train, compensate and promote without unlawful discrimination as to race, religion, sex, age, national origin, citizenship, disability, or any other category that is protected by applicable federal, state or local law. It is the intent of CHS Inc. to comply with all applicable equal opportunity and affirmative action laws, directives, regulations of federal, state and local governing bodies and agencies.

CHS Inc.
5500 Cenex Drive, Inver Grove Heights, Minnesota 55077 (May 2011)

www.chsinc.com

PERSONAL DATA

Please answer only those questions that are asked within this application. Any additional information that you provide that is not requested will not be considered and may void this application.

NAME (first, middle, last)		PREFERRED FIRST NAME	
EMAIL ADDRESS	TELEPHONE NUMBER ()	ALTERNATE NUMBER ()	ARE YOU OVER 18 YEARS OF AGE? Yes No
PRESENT ADDRESS		CITY/STATE	ZIP

POSITION DESIRED		HAVE YOU PREVIOUSLY WORKED AT CHS Inc.? If, yes, when and where? Yes No	
STARTING WAGE DESIRED	ARE YOU WILLING TO RELOCATE? Yes No	IF YES, WHERE?	

Do you have any experience, skills or qualifications (including special study, research or training) which you feel would benefit CHS? If so, please explain.

Do you have any mechanical experience or experience in a skilled trade? If so, please explain.

EDUCATION AND TRAINING

Name of School	Dates Attended (Start to End)	Degree Type	Degree Major	Did you Graduate?
High School				
College/University				
College /University				
Vocational/Business				
Training Course				
Training Course				

IF FOREIGN LANGUAGE IS LISTED ON THE JOB DESCRIPTION, PLEASE DESCRIBE YOUR FOREIGN LANGUAGE SKILLS:

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EMPLOYMENT HISTORY

Please provide the following information concerning your previous employers for the past seven (7) years (start with the most recent and work backward).

DATES/SALARY	1. Full name of employer 2. Street address 3. City, State, Zip Code	4. Type of business 5. Position title 6. Name of Supervisor/Telephone	DESCRIBE MAJOR RESPONSIBILITIES	Full-time Part-time Temporary
FROM (month/year)	1.			
	2.			
	3.			
TO (month/year)	4.			
	5.			
	6.			
Ending Salary	REASON FOR LEAVING			
DATES/SALARY	1. Full name of employer 2. Street address 3. City, State, Zip Code	4. Type of business 5. Position title 6. Name of Supervisor/Telephone	DESCRIBE MAJOR RESPONSIBILITIES	Full-time Part-time Temporary
FROM (month/year)	1.			
	2.			
	3.			
TO (month/year)	4.			
	5.			
	6.			
Ending Salary	REASON FOR LEAVING			
DATES/SALARY	1. Full name of employer 2. Street address 3. City, State, Zip Code	4. Type of business 5. Position title 6. Name of Supervisor/Telephone	DESCRIBE MAJOR RESPONSIBILITIES	Full-time Part-time Temporary
FROM (month/year)	1.			
	2.			
	3.			
TO (month/year)	4.			
	5.			
	6.			
Ending Salary	REASON FOR LEAVING			

BUSINESS/PROFESSIONAL REFERENCES

NAME	TITLE	COMPANY	TELEPHONE NUMBER

OTHER PERSONAL HISTORY

Have you been convicted of a crime (excluding summary offenses, sealed or impounded convictions, and convictions which have been expunged, pardoned, annulled, dismissed, or erased) in the past seven (7) years? *(See below) Yes No

Conviction of a crime will not necessarily disqualify you from employment. Factors such as the age and time of the offense, seriousness and nature of the violation, and rehabilitation will be considered when making employment decisions.

** Applicants in Colorado, Hawaii, Massachusetts, Missouri and West Virginia need not respond to this question at this time.*

Applicants in Georgia need not disclose information pertaining to "first offender discharge."

Applicants in Utah need only disclose information pertaining to felony convictions.

If your answer is "yes", please explain the circumstances surrounding such offense, including place, date, name of court, etc.

UNDERSTANDING REGARDING CONDITIONS OF EMPLOYMENT

I certify that the facts contained in this application are true and correct to the best of my knowledge and I understand that, if I am employed, false or concealed statements on this application shall be grounds for dismissal, no matter when discovered.

I understand that this employment application is valid for the position applied for at the present and that CHS Inc. ("CHS") is not obligated to retain or consider this application for future openings.

Subject to any law to the contrary, I understand and agree that, if hired, my employment is for no definite period and may be terminated at any time for any reason or no reason at all, without prior notice. I also understand that no representative of CHS other than an officer of CHS has the authority to enter into any agreement to the contrary, and then only if such agreement is in a written and signed document.

I understand that this application does not guarantee a current job opening and does not obligate CHS to hire me.

I understand that, if hired, I will be required to furnish proof of identity and right to work in the United States. An employee's failure to provide a valid Social Security Number for wage report purposes may result in personnel action up to and including termination.

If you receive an offer of employment, it may be contingent upon testing for use of illegal drugs and a background investigation.

SIGNATURE

DATE



APPLICANT TRACKING FORM

CHS is an **Equal Employment Opportunity Employer**. It is the policy of CHS to recruit, hire, train and promote without regard to race, color, creed, religion, sex, age, national origin, marital status, disability, sexual orientation, status with regard to public assistance or status as a disabled veteran or Vietnam Era Veteran, except where religion, sex and national origin is a bona fide occupational qualification. It is also the policy of CHS to comply with all applicable equal opportunity and affirmative action laws, directives and regulations of federal, state and local governing bodies and agencies.

CHS requests that you complete the information requested below for the purpose of meeting our reporting obligations and for determining the impact of our employment procedures.

This form will be immediately separated from your application, and your responses will **NOT** be used in assessing your application for employment.

Although your response is voluntary, CHS appreciates your cooperation. Thank you for your interest in employment with CHS.

Please print.

Name: _____

Application Date: _____ Location: _____

Position Applied For: _____

Referral Source: Advertisement (which newspaper?) _____

Employment Agency (which agency?) _____

Employee Referral

Job Service

Walk In

Other (describe)

Sex: Male

Female

Race: White

Black

Hispanic

Asian/Pacific Islander

American Indian/Alaskan Native

Signature: _____

Place
Stamp
Here

CHS
(Work Location Address)

(Fold Here)

(Fold Here)