

Agricultural Application Engineer

Agri Drain Corporation is seeking an Application Engineer to program & test automated control systems prior to shipping, provide field installation & warranty support for automated control systems, attend trade shows & field days to promote and demonstrate automated drainage water management systems. Requires an Engineering degree or related technical degree and/or equivalent experience and familiarity with PLC programming and scripting in BASIC, Python or Javascript. Benefits include health & vision insurance, vacation & sick pay, 401k and short & long-term disability.



641-742-5211 Phone
877-866-9312 Fax
1462 340th Street · Adair, IA 50002
HR@agridrain.com

Job Description / Requirements Overview for Plant Employees

As a prospective employee of Agri Drain Corporation, there are certain functions you may encounter or be expected to do if employed. Many of these tasks are of a physical capacity, and are important for you to know as an applicant. The functions include, but may not be limited to:

- Standing for long periods of time (up to 4 hours continually).
- Bending, stooping, squatting, and walking repetitively.
- Lifting and/or carrying up to 50 pounds individually.
- Performing repetitive arm, hand, wrist, leg, foot, or ankle motions continually while performing work functions.
- Working in hot conditions.
- Bending at waist and being in awkward positions.
- Good hand and wrist strength for gripping tools and equipment.
- Good hand and wrist dexterity.

Can you perform the above functions? Yes _____ No _____
If you answered No, please list the reasons for any limitations you have relative to performing the above functions.

Signature: _____ Date: _____



P.O. Box 458 • 1462 340th St. • Adair, IA 50002 • Ph: 800-232-4742 • Fax: 800-282-3353 • www.agridrain.com • hr@agridrain.com

APPLICATION FOR EMPLOYMENT
(Please Print)

| | |
|------|---|
| Date | Position/Type of Work You Desire (If applying for a position as a driver, please also complete page 5.) |
|------|---|

| | | |
|-----------|------------|----------------|
| Last Name | First Name | Middle Initial |
|-----------|------------|----------------|

Mailing Address (include Street/Box/Route, City, State, Zip Code)

| | |
|-------------------|------------------------|
| Home Phone Number | Social Security Number |
|-------------------|------------------------|

Are you legally eligible to work in the United States? Yes _____ No _____

Have you been employed by Agri Drain Corp. previously? Yes _____ No _____ (Give dates below)
Dates:

How were you referred to Agri Drain Corp.?

| | |
|--|--|
| Are you applying for full time _____ part time _____ or summer _____ employment? | Amount of notice required before starting work _____ |
|--|--|

| | |
|-------------------------------|--------------------------------|
| List days available for work: | List hours available for work: |
|-------------------------------|--------------------------------|

If necessary, are you available for overtime work? Yes _____ No _____

Are you 18 years of age or older? Yes _____ No _____ If NO: Date of Birth ____/____/____
(Federal and state laws on hazardous occupations may require you to be over 18 years old.)

Do you have a driver's license? Yes _____ No _____

Do you have a chauffeur's license? Yes _____ No _____

Have you ever been convicted for anything other than a minor traffic violation? Yes _____ No _____
If yes, please explain:

(This information will not automatically disqualify you for employment, but may be considered in relation to the position for which you are applying.)

This company is an equal employment opportunity employer. We will not tolerate discrimination because of race, color, religion, sex, age, physical impairment, or national origin.

All qualified applicants are welcome to submit applications for employment.

EDUCATION

| School | Name/Location of School | Course of Study | Number of Years Completed | Did You Graduate? | Type of Degree or Diploma |
|--------------------------|-------------------------|-----------------|---------------------------|-------------------|---------------------------|
| High School | | | | Y or N | |
| Business/Trade/Technical | | | | Y or N | |
| College | | | | Y or N | |
| Graduate School | | | | Y or N | |

Do you have training and/or experience in operating equipment such as table saws, routers, welders, drill presses, forklifts, band saws, iron shears, press brake, milling machines, or in machining, industrial painting, fabrication, or assembling (mechanical, electrical, hydraulic)? If yes, please give dates and details of training and/or experience:

Other specialized skills, licenses, or training (computer skills, workshops, seminars, short courses, etc.)? Please give dates and details:

EMPLOYMENT

(Please give accurate, complete information regarding your previous employment and military experience. **Most recent experience should be listed first.** Please explain any gaps in time.)

| | |
|--|--|
| Company Name | Telephone Number (include area code) |
| Complete Address | Dates of Employment (Mo/Yr) From: _____ To: _____ |
| Name of Supervisor | Final Wage \$ _____/hour or \$ _____/month |
| Job Title/Describe Job Duties & Equipment Used | Reason for Leaving |

May we contact this employer? _____ Yes _____ No

| | |
|--|--|
| Company Name | Telephone Number (include area code) |
| Complete Address | Dates of Employment (Mo/Yr) From: _____ To: _____ |
| Name of Supervisor | Final Wage \$ _____/hour or \$ _____/month |
| Job Title/Describe Job Duties & Equipment Used | Reason for Leaving |

May we contact this employer? _____ Yes _____ No

| | |
|--|--|
| Company Name | Telephone Number (include area code) |
| Complete Address | Dates of Employment (Mo/Yr) From: _____ To: _____ |
| Name of Supervisor | Final Wage \$ _____/hour or \$ _____/month |
| Job Title/Describe Job Duties & Equipment Used | Reason for Leaving |

May we contact this employer? _____ Yes _____ No

OTHER INFORMATION

Please list Agri Drain Corp. employees you know: _____

Please list any additional information about you and/or your past work, training, or personal experiences that you would like us to consider: _____

REFERENCES

Please name **three** work related, school, or personal references who are **not** previous supervisors.

| | |
|------------------|---|
| Name | Telephone Number(s) (include area code) |
| How Known By You | Years Known |
| Name | Telephone Number(s) (include area code) |
| How Known By You | Years Known |
| Name | Telephone Number(s) (include area code) |
| How Known By You | Years Known |

SIGNATURE

I attest that the above information is true, correct, and complete. If I am employed, I understand that any falsified statements or omissions of fact on this application shall be sufficient cause for dismissal.

I hereby authorize my former employers, educational institutions, and references to furnish or verify any information concerning my application for employment. I further authorize Agri Drain Corp. to contact my former employers, educational institutions, and references for the purpose of obtaining such information (unless previously stated in writing to the contrary).

I understand that my employment can be terminated at any time and for any reason by me or Agri Drain Corp., oral representations to the contrary notwithstanding. This application does not constitute an agreement or contract, or employment for any specified period or duration of time.

If I am employed, I further understand that I am required to abide by all rules and regulations as set forth by Agri Drain Corp.

I agree, as a condition of employment, to provide documents establishing proof of identify and employment eligibility in compliance with the Immigration Reform and Control Act of 1986.

I understand the information in this application may be shared with Schafer Partnership. All statements in this document referring to Agri Drain Corp. are applicable to Schafer Partnership.

I have read and fully understand the foregoing and seek employment under these conditions.

(Date)
(Signature)

EXPERIENCE AND QUALIFICATIONS -- DRIVERS

| Driver Licenses | State | License # | Type | Expiration Date |
|-----------------|-------|-----------|------|-----------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

DRIVING EXPERIENCE

| Class of Equipment | Type of Equipment (Van, Tank, Flat, Etc.) | Dates | | Approx. # of Miles (Total) |
|------------------------|--|-------|----|-------------------------------|
| | | From | To | |
| Straight Truck | | | | |
| Tractor & Semi-Trailer | | | | |
| Tractor-Two Trailers | | | | |
| Other | | | | |

ACCIDENT RECORD FOR PAST 3 YEARS OR MORE (ATTACH SHEET IF MORE SPACE IS NEEDED)

| Dates | Nature of Accident (Head-On, Rear-End, Upset, etc.) | Fatalities | Injuries |
|------------------------|--|------------|----------|
| Last Accident / / | | | |
| Next Previous / / | | | |
| Next Previous / / | | | |

TRAFFIC CONVICTIONS AND FORFEITURES FOR THE PAST 3 YEARS

(OTHER THAN PARKING VIOLATIONS)

| Location | Date | Charge | Penalty |
|----------|------|--------|---------|
| | | | |
| | | | |
| | | | |
| | | | |

(ATTACH SHEET IF MORE SPACE IS NEEDED)

- A. Have you ever been denied a license, permit, or privilege to operate a motor vehicle? Yes _____ No _____
 B. Has any license, permit, or privilege ever been suspended or revoked? Yes _____ No _____

IF THE ANSWER TO EITHER A OR B IS YES, ATTACH A STATEMENT GIVING DETAILS.