Product Development Agricultural Engineer

Agri Drain Corporation is seeking an Engineer to conduct research & development activities, improve & develop new products & systems. Actively participate in ongoing problem solving processes. Requires a Bachelor's of Science degree in Agricultural Engineering or related technical degree and/or equivalent experience.



HR@agridrain.com



America's Most Complete Supplier of Water Management Products

P.O. Box 458 • 1462 340th St. • Adair, IA 50002 • Ph: 800-232-4742 • Fax: 800-282-3353 • www.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_____ No_____ If you answered No, please list the reasons for any limitations you have relative to performing the above functions.

Signature: _____ Date:_____

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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 Nam					Middle Initial
Mailing Address (inclu	ide Street/Box/Route,	City, State	, Zip Code))	
Home Phone Number			Social Security Number		
Are you legally eligible	e to work in the Unite	d States?	Yes _	No	
Have you been employ Dates:	ed by Agri Drain Cor	p. previous	sly? Yes	No	(Give dates below)
How were you referred	l to Agri Drain Corp.?)			
Are you applying for full time part time	Are you applying for Amount of notice required full time part time or summer employment? Amount of notice required before starting work I ist hours queilable for work				
List days available for	List days available for work: List hours available for work:				
If necessary, are you av	vailable for overtime	work? Ye	es	No	
Are you 18 years of ag (Federal and	e or older? Yes state laws on hazardous	No s occupatior	is may requi	If NO: Date re you to be ove	of Birth ////
Do you have a driver's	license? Yes	No			
Do you have a chauffe	ur's license? Yes _	N	0		
Have you ever been co If yes, please explain:	nvicted for anything of	other than a	ı minor traf	fic violation?	Yes No
(This information will not auto	matically disqualify you for em	plovment but m	nav be considere	d in relation to the po	osition 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 N	0		
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 N	Ιο		

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.

(Signature)

Driver	State	License #	Туре	Expiration Date
Licenses				

EXPERIENCE AND QUALIFICATIONS -- DRIVERS

DRIVING EXPERIENCE

Class of Equipment	Type of Equipment (Van, Tank, Flat, Etc.)	D From	ates To	Approx. # of Miles (Total)
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.