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 ver. 1.1

> > 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	TODAY'S DATE		
EMAIL ADDRESS	TELEPHONE NUMBER	ALTERNATE NUMBER	ARE YOU UNDER 18 YE	ARS OF AGE?	
			☐ Yes	No	
PRESENT ADDRESS	/	CITY/STATE	ZIP		
POSITION DESIRED		ARE YOU AUTHORIZED AND CAN YOU PROVII IN THE UNITED STATES?	DE VERIFICATION OF YOUR RIG	HT TO WORK	
		Yes No			
STARTING WAGE DESIRED	ARE YOU WILLING TO RELOCATE?	HAVE YOU PREVIOUSLY WORKED AT CHS INC	HAVE YOU PREVIOUSLY WORKED AT CHS INC.?		
		If, yes, when and where?			
	☐ Yes ☐ No	☐ Yes ☐ No			
Do you have any other experience, skills	or qualifications (including special stu	dy, research or training) which you feel would	benefit CHS? If so, please e	explain.	
Do you have any mechanical experience	or experience in a skilled trade? If so,	please explain.			
	EDU	ICATION			
Circle highest year of school comple					
each category.	9 10 11	12		4 5	
Name of School (city/state)	Major Stud	Did you graduate? Yes or No	Degree/ Major	Cumulative GPA (A = 4.0)	
High School					
Business, Trade or Correspondence					
College (undergraduate)					
College (undergraduate)					
Graduate School					
IF FOREIGN LANGUAGE IS LISTED ON THE JOE	 B DESCRIPTION, PLEASE DESCRIBE YOUR FO	DREIGN LANGUAGE SKILLS:			

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

#### BUSINESS/PROFESSIONAL REFERENCES

NAME	TITLE	COMPANY	TELEPHONE NUMBER

#### 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 I am presently applying for and that 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 at-will, which means CHS or I may terminate my employment 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 modifying my at-will employment, and only then if such agreement is in a written and signed document by a CHS officer.

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 reporting purposes may result in personnel action up to and including termination.

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

SIGNATURE	DATE