Addendum to Job Application & Description

Equipment Operator I

Winneshiek County will be accepting applications for the position of Equipment Operator I based out of the Locust Shop until 4:00 p.m. on Friday, November 6, 2026 at the Winneshiek County Engineer's Office.

New Road Department employees must possess a Class A commercial driver's license and medical card at application.

The starting per hour wage is set by the Collective Bargaining Agreement between Winneshiek County and the United Electrical, Radio and Machine Workers of America.

Equipment Operator I Current Base Rate $29.38

You will be given the option of becoming a dues paying member of the Union. It is the employee's choice and is not required. However, the employee is bound to the collective bargaining agreement.

The regular work week is 40 hours, Monday through Friday. The current hours are 7:00 a.m. to 3:30 p.m. Time and one-half is paid for overtime hours or employees may choose to take compensatory time off at a later date granted one and one-half hours for each overtime hour worked.

All full-time employees are covered by the Iowa Public Employees' Retirement System. Currently 6.29% of each payroll check is deducted for this retirement plan. In addition, the County pays 9.44% to the plan. The County currently has Blue Cross Blue Shield for health insurance. The County pays the majority of the employee premium of $1,160 per month and employee+children premium of $1,624.50 for employees and whole family coverage is available at the employee's cost. Health Savings Accounts (HSA) are available as well. The County also offers optical, life and dental insurance as well.

There are ten paid holidays each year. Vacation is earned as follows and is calculated from the anniversary date of employment.

Years of Service	Vacation Days
Upon Employment	10 Days
6 years but less than 12 years	15 Days
12 years or more	20 Days

Other leaves that are available are detailed in the union contract and include sick leave, funeral leave, military leave, leaves without pay, etc.

Upon offer of this position, the potential employee will be required to pass a pre-employment DOT drug test and successfully complete a physical assessment. Employees receive a copy of the County Employee Policy Manual and will be required to sign statements of understanding associated with the manual.

EQUIPMENT OPERATOR I

DEFINITION

Under general supervision, performs skilled operation of heavy specialized equipment used in maintenance and construction of roads and bridges on the Secondary Road System. Performs related work as required.

PRIMARY DUTIES

Performs all the duties assigned to Equipment Operator I as required. Operates heavy and special equipment such as motor graders, dozers, end loaders, backhoe, excavators, trucks and other equipment used in the maintenance and construction of roads, bridges and culverts; works and operates equipment skillfully and safely in conformance with regulations and directions; performs routine mechanical maintenance of equipment operated; performs routine unskilled manual labor as required.

ENTRY REQUIREMENTS

Required Knowledge, Abilities and Skills. Ability to understand and follow written and oral directions; ability to perform manual labor that requires repeated bending, lifting and carrying items weighing up to 50 pounds and to operate equipment for extended periods under unfavorable weather conditions; working knowledge of mechanical principles; ability to establish and maintain an effective working relationship with fellow employees and with the public; performs related work as required.

Minimum Education, Training & Experience. Graduation from high school or G.E.D. equivalent and experience and knowledge of road maintenance and construction.

Required Special Qualifications. Must possess and maintain a Class A Commercial Driver's License for manual semi-tractor trailer (no restrictions) with a medical card at application.

WINNESHIEK COUNTY SECONDARY ROADS

Application for Employment

It is the policy of Winneshiek County to afford equal opportunity to all employees and applicants for employment without regard to age, race, religion, color, sex, sexual orientation, gender identity, national origin, marital status, disability, pregnancy, veteran status, genetic information, and any other characteristic protected by federal state or local law.

Instructions

- Complete all relevant information on this application, even if a resume is submitted.
- Please let us know if you need a reasonable accommodation as we provide reasonable accommodations to known disabilities of applicants.
- All relevant information and the applicant's signature must be provided on this form to be considered for employment.
- This application shall be active until the position applied for is filled. If you wish to be considered for employment with Winneshiek County for another position, you must submit a new application.
- Please sign this form; then return, mail or fax to: Winneshiek County Engineer's Office, 201 W Main Street, Decorah, IA 52101

Personal Information

Name: _____
Last First Middle

Present Address: _____
Street City State Zip

Permanent Address: _____
(If different from present) Street City State Zip

Phone Number(s): _____ _____
Home phone Alternate phone

E-mail: _____ Social Security Number: ___-___-____

Employment Desired

Position(s) applying for: _____

How did you learn about this position? _____

Date you can start work: _____

Are you currently employed? ☐ Yes ☐ No

If so, may we contact your employer? ☐ Yes ☐ No

Are you available to work weekends and evenings? ☐ Yes ☐ No

Education/Training

Circle highest grade completed: 9 10 11 H.S. Diploma GED College: 1 2 3 4 5 6 7 8

EDUCATION

Dates Attended	Major or Degree Attained	School Name & Address

SPECIAL SKILLS AND QUALIFICATIONS

_____

_____

Do you have a: Valid Driver's License ☐Yes ☐ No

Valid Class A or B CDL ☐Yes ☐ No If yes, list class: _____

List all endorsements and/or restrictions on CDL:_____

Other Licenses, Trades or Certifications (Type and Number):_____

_____

Additional Information relevant to this position: _____

_____

_____

(If additional space is needed attach separate sheet.)

Employment Experience

Start with your present or most recent job and list prior employers. If you have been employed for more than ten years, please provide a minimum of ten years' employment history. Include military service, job-related volunteer activities, and periods of unemployment.

Current or Most Recent

Position Title _____ Employment Dates _____ to _____

Employer _____ Phone # _____

Address _____ City _____ State _____ Zip _____

Direct Supervisor _____ May we contact for a reference check? Yes ☐ No ☐

Annual Compensation _____ Hours Per Week _____ # of employees supervised _____

Primary Job Duties _____

_____

_____

_____

Reason for wanting to leave _____

Position Title _____ Employment Dates _____ to _____

Employer _____ Phone # _____

Address _____ City _____ State _____ Zip _____

Direct Supervisor _____ May we contact for a reference check? Yes ☐ No ☐

Annual Compensation _____ Hours Per Week _____ # of employees supervised _____

Primary Job Duties _____

_____

_____

_____

Reason for leaving _____

Position Title _____ Employment Dates _____ to _____

Employer _____ Phone # _____

Address _____ City _____ State _____ Zip _____

Direct Supervisor _____ May we contact for a reference check? Yes ☐ No ☐

Annual Compensation _____ Hours Per Week _____ # of employees supervised _____

Primary Job Duties _____

_____

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_____

Reason for leaving _____

Background Information

Have you previously been employed by Winneshiek County? ☐ Yes ☐ No

If yes, where, when_____

Do you have any relative(s) currently working for Winneshiek County? ☐ Yes ☐ No

Name(s):_____ Department(s):_____

Are you a veteran of the US military service? ☐ Yes ☐ No

Have you ever been charged with a criminal violation?* ☐ Yes ☐ No

If yes, please explain, including dates, location (State, County and City) of incident: _____

*Applicants will not be automatically screened out on the basis of prior criminal charges or convictions.

Professional References

Provide the names of three persons not related to you, who are familiar with your work.

Name	Company	Relationship	Years Acquainted	Phone Number
1.				
2.				
3.				

Notification and Authorization

Please read carefully. If you have any questions, ask before signing.

I hereby certify that the statements made by me in this application and all related information which I have provided are true, accurate and complete to the best of my knowledge. I understand that if I provide any false, inaccurate, or incomplete information, I will not be eligible for employment, or, if I am hired, that I may be terminated regardless of the date on which the County discovers the violation of its policy regarding application form dishonesty.

In connection with my application for employment with the County, I expressly authorize the release to the County of any records or information which may refer or relate to my application for employment, including, but not limited to, records of schools, law enforcement or criminal justice agencies, and previous employers. I authorize the County to seek or solicit any lawful information about me that it deems useful to determine my employability, including social media postings. I hereby release and discharge the County and any other person, firm, agency or corporation from any and all claims and liability which I may have or ever claim to have relating to information provided to the County as part of my application for employment. If I accept employment with Winneshiek County, I understand that I will be expected to comply with all rules, regulations, and policies set forth for Winneshiek County employees.

_____

Signature of Applicant Date

Additional Employment History

Position Title _____ Employment Dates _____ to _____

Employer _____ Phone # _____

Address _____ City _____ State _____ Zip _____

Direct Supervisor _____ May we contact for a reference check? Yes ☐ No ☐

Annual Compensation _____ Hours Per Week _____ # of employees supervised _____

Primary Job Duties _____

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Reason for leaving _____

Position Title _____ Employment Dates _____ to _____

Employer _____ Phone # _____

Address _____ City _____ State _____ Zip _____

Direct Supervisor _____ May we contact for a reference check? Yes ☐ No ☐

Annual Compensation _____ Hours Per Week _____ # of employees supervised _____

Primary Job Duties _____

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Reason for leaving _____

Position Title _____ Employment Dates _____ to _____

Employer _____ Phone # _____

Address _____ City _____ State _____ Zip _____

Direct Supervisor _____ May we contact for a reference check? Yes ☐ No ☐

Annual Compensation _____ Hours Per Week _____ # of employees supervised _____

Primary Job Duties _____

_____

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_____

Reason for leaving _____

Motor Vehicle Records Release

I am aware that consumer and motor vehicle reports may be obtained as part of Winneshiek County's evaluation of my job application and/or employment. The reports may be procured by Winneshiek County or its insurance company representative(s) and may include personal information obtained from state motor vehicle departments, my driving record, an assessment of my insurability for the insurance program, or other consumer reports.

By signing this form below, I hereby provide my authorization for Winneshiek County or their insurance company representative(s) to procure such information and reports, as well as additional reports about me from time-to-time as deemed appropriate, to evaluate my insurability or for other permissible purposes.

Federal Motor Carrier Safety Administration (FMSCA)
Drug and Alcohol Clearinghouse Pre-Employment Query

I hereby provide consent to Winneshiek County to conduct a limited query of the FMCSA Commercial Driver's License Drug and Alcohol Clearinghouse (Clearinghouse) to determine whether drug or alcohol violation information about me exists in the Clearinghouse.

I understand that if the limited query conducted by Winneshiek County indicates that drug or alcohol violation information about me exists in the Clearinghouse, FMCSA will not disclose that information to Winneshiek County without first obtaining additional specific consent from me.

I further understand that if I refuse to provide consent for Winneshiek County to conduct a limited query of the Clearinghouse, Winneshiek County must prohibit me from performing safety-sensitive functions, including driving a commercial motor vehicle, as required by FMCSA's drug and alcohol program regulations.

_____

Signature Applicant/Employee Date

_____

Name as it appears on Driver License

_____

Driver License Number/State of Issuance

_____

Date of Birth