



Job Title: Electrician – Automated Agricultural Equipment

Department: Technical Development

Location: Monterey County, CA and Yuma, AZ

Mantis Ag Technology pairs the latest in farm equipment design with innovative vision recognition software to maximize the efficiency of our grower/clients through the development of industry leading automated smart-spraying and cultivation technologies. Mantis Ag Technology is currently looking for a qualified **Electrician** to join our innovative team.

Essential Duties and Responsibilities include the following (other duties may apply):

- Diagnose and repair electrical malfunctions on machinery
- Install electrical systems on machinery during build ups and overhauls
- Ability to diagnose electrical malfunctions and provide efficient solutions based on operational tempo
- Assist in the production, research and development and technical support of Mantis' existing and prototype machines.
- In Field Testing
- Troubleshooting issues with existing Machines and documenting progress
- Customer Service
- Inventory Control and Purchasing

Qualifications to perform this job successfully:

- Strong attention to detail and complex problem-solving skills
- Knowledge of fundamentals of electrical wiring
- Automotive Specialist Electrical Certification, or 2+ years' experience in the field.
- Ability to work in physically demanding positions, stand for prolonged periods, and lift up-to 50 pounds at a time
- Must be able to safely work in an outdoor agricultural setting around heavy machinery and chemical applications
- Must possess basic computer skills, proficient in Microsoft Programs
- Must have a clean driving record and the ability to pass a substance abuse screening
- May require travel between Salinas, CA and Yuma, AZ between October and January. Per diem and lodging provided.

Salary:

- Commensurate with education and experience



Benefits:

- Competitive Health Insurance
- Paid vacation
- 401k Retirement Plan

To apply:

Submit a resume and completed application (*form below*) to jwiegand@mantisag-tech.com

Any questions:

Contact Jake Wiegand at jwiegand@mantisag-tech.com



APPLICATION FOR EMPLOYMENT

Mantis Ag Technology, Inc.
10 Gonzales River Rd
PO Box 950
Gonzales, CA 93926
(831)675-0168 Office - (831)675-3829Fax

Application Date/Fecha de Aplicacion: ____/____/____

Personal Information/Informacion Personal:

Name/Nombre: _____
Last/APELLIDO First/Primer Middle/Inicial

Address/Direccion: _____
Street/Calle City/Ciudad State/Estado Zip/Cod.Pos.

Home Phone/Telefono: (____)____-____ Cell Phone/Cellular: (____)____-____

Date of Birth/Fecha de Nacimiento: ____/____/____ SSN: ____-____-____

In case of emergency, notify:
En caso de urgencia, notificar: _____ Phone #/Telefono #: (____)____-____

Name of relatives in our company
Nombre de parientes en nuestra compania: _____ Relation/Relacion: _____

Desired Position/Posición Deseada: _____ Desired Salary/Sueldo Deseado: _____

Date you can start/La fecha que usted puede comenzar: ____/____/____

Referred By/Recomendado: _____

Are you currently employed?
¿Actualmente esta trabajando? YES / NO

May we contact your employer?
¿Podemos ponernos en contacto con su patrón? YES / NO

Education/Educacion:

School/Escuela	Name/Nombre	Graduated?/ ¿Graduado?
High School/Instituto		YES / NO
College/Colegio		YES / NO
Other(Specify)/Otro(Especificar)		YES / NO



Driver Licenses/Licencia de Conducir:

License #/Licencia#	State/Estado	Type of License/Tipo de Licencia	Exp Date/Fecha de Vencimiento

Accident Record/Record de Manejo:

Location/Posicion	Date/Fecha	Nature of Accident/Descripcion de Accidente	Fatalities/Victimias	Injuries/Heridas
Last Accident/ <i>Ultimo Accidente</i>			YES / NO	YES / NO
Next Previous/ <i>Siguiente Anterior</i>			YES / NO	YES / NO
Next Previous/ <i>Siguiente Anterior</i>			YES / NO	YES / NO

**Traffic Convictions and Forfeitures for Past 3 Years (Other than parking)/
Convicciones de trafico y perdidas durante los ultimos tres anos (Otros, como estacionamiento):**

Location/Posicion	Date/Fecha	Violation/Violacion	Penalty/Pena

A. Have you ever been denied a license, permit or privilege to operate a motor vehicle?

¿Alguna vez se le ha negado una licencia, permiso o privilegio de manejar un automóvil?

YES / NO

B. Has any license, permit or privilege ever been suspended or revoked?

¿Alguna vez le han suspendido su licencia o le han revocado su privilegio de manejar?

YES / NO

If the answer to A or B is yes, give details/*Si la respuesta A o la B es sí, dé detalles:*



Personal References/ Referencias Personales:

Name/Nombre	Address/Direccion	Phone #/ Telefono #	Years Acquainted/ Anos Enterados

I authorize investigation of all statements contained in this application and understand that misrepresentation of facts may be cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without previous notice. The employment relationship between this organization and the employee is an "At Will" relationship.

Autorizo la investigación de todas las declaraciones contenidas en este uso y entiendo que la falsificación de hechos puede ser la causa para el despido. Más lejos, entiendo y convengo que mi empleo no es para ningún período definido y puede, independientemente de la fecha de pago de mis salarios y sueldo, ser terminado en cualquier momento sin el previo aviso. La relación de empleo entre esta organización y el empleado es "un A voluntad" la relación.

Signed/ Firmado: _____
 _____/_____/_____

Date/Fecha: _____

Employment Record / Registro de Empleo

Notice: The Department of transportation requires that employment for at least three years and/or commercial driving experience for _____ the past ten years be shown./*Noticia:* El Departamento de transporte requiere que muestren el empleo durante al menos tres años y/o la experiencia comercial conductor durante los diez años pasados.

Please list your last three employers below/Por favor de poner sus ultimos tres empleos:

Employer/Compania de Empleo: _____
 Supervisor: _____

Position held/Posicion de trabajo: _____ From/De: ___/___/___
 To/A: ___/___/___

Address/Direccion: _____

 _____ Street/Calle or P.O. Box _____ City/Ciudad _____ State/Estado
 _____ Zip/Cod.Pos.

Phone Number/Telefono #:(_____)_____-_____ Reason for leaving/Razon de salida: _____

Employer/Compania de Empleo: _____
 Supervisor: _____



Position held/Posicion de trabajo: _____ From/De: ___/___/___
To/A: ___/___/___

Address/Direccion: _____

Zip/Cod.Pos. Street/Calle or P.O. Box City/Ciudad State/Estado

Phone Number/Telefono #:(_____)____ - _____ Reason for leaving/Razon de salida: _____

Employer/Compania de Empleo: _____
Supervisor: _____

Position held/Posicion de trabajo: _____ From/De: ___/___/___
To/A: ___/___/___

Address/Direccion: _____

Zip/Cod.Pos. Street/Calle or P.O. Box City/Ciudad State/Estado

Phone Number/Telefono #:(_____)____ - _____ Reason for leaving/Razon de salida: _____

You must answer the following questions. Failure to do so will result in the voiding of your application.

Usted debe contestar las preguntas siguientes. El fracaso, resultaria anular su aplicacion.

1. Have you tested positive or refused to test on a pre-employment drug and alcohol test administered by an employer that you applied to, but did not obtain, safety sensitive transportation work?/Has salido positivo o te has rehusado a un examen de droga cuando has aplicado en un empleo?

YES / NO

2. Have you ever tested positive for drugs and/or alcohol on a test required by the Federal Motor Carrier Safety Regulations?/Has salido positivo en un examen de droga o alcohol por las reglas de portador federales de motor?

YES / NO

3. If you answered yes to either of the above questions, have you completed required treatment and return to duty testing as order by a certified Substance Abuse Professional (SAP)?/Si contesto que si en las dos preguntas anteriores, a completado todo lo necesario para regresar a trabajar de acuerdo a un Professional de Abuso de Sustancia?

YES / NO



Driver Experience and Qualifications/*Cualidades y Experiencia del Chofer*

(Drivers Only)/(*Para Choferes Solamente*)

Class of Equipment/ <i>Clase de Equipo</i>	Type of Equipment/ <i>Tipo de Equipo</i>	Dates/<i>Fechas</i>	Makes, Models, Manufacturers/ <i>Hechos, Modelos, Armados</i>
Tractor/ <i>Troque</i>			
Straight Truck/ <i>Troque Solamente</i>			
Tractor Trailer/ <i>Troque con Traila</i>			
Doubles or Triples/ <i>Dobles o Triples</i>			
Other/ <i>Otro</i>			

To be read and signed by applicant/*Debe leerse y firmarse por el aplicante*

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge./*Esta aplicacion fue completada por mi y toda la informacion es verdadera de acuerdo a mi conocimiento.*

_____/_____/_____
Applicant's Signature/*Firma del Apicante*