

JOB TITLE: WEED WORKER

SUPERVISOR: AG AGENT/WEED OFFICER

JOB SUMMARY

Performs duties to furnish noxious weed control, herbicide applications. Responsible for record keeping for the weed control programs.

SCOPE OF RESPONSIBILITY

The intent of this job description is to provide a representative summary of the primary duties and responsibilities performed by incumbents in this position. Incumbents may not be required to perform all duties in this description, and incumbents may be requested to perform position-specific tasks other than those listed in this job description.

- Obtain, or maintain pesticide certification.
- Be able to identify noxious weeds.
- Surveys and plots noxious weeds, and after determining needs, arrange for distribution.
- Documents applications of pesticides and insecticides and ensures master sheets by township and highways are completed.
- Identifies and reports potential hazards and/or conditions which might be hazardous.
- Keep accurate and detailed records for each spraying, checks records for accuracy and completeness.
- Ensures spraying and other equipment used by Weed Control Department is inventoried and in proper operational condition.
- Maintains Material Safety Data Sheets on all insecticides and pesticides for Weed Control and its storage facility.
- Ensures proper storage of chemicals and inspects storage areas at least monthly.
- Uses safety equipment and clothing when around chemicals.
- Operates various types of machinery.
- Maintains operation log for spraying (date, time, location, and weather conditions).
- Performs other related duties as assigned.

REQUIREMENTS

- Proficient GIS Mapping and an aptitude for computer software.
- Excellent verbal, written and presentation skills.
- Requires possession of a valid Class "D" Driver's License.
- Have a Pesticide Certification in Ag Pest and Right of Way.
- Detail-oriented and thorough.

PHYSICAL REQUIREMENTS

- Must be able to lift, bend, stoop, climb, reach, and lift up to 50 pounds at a time.
- May be exposed to fumes, chemicals and toxins and outside temperature extremes.

MOUNTRAIL COUNTY, ND

EQUAL EMPLOYMENT OPPORTUNITY FORM

We invite you to complete the enclosed Equal Employment Opportunity form and return it to our Title VI Coordinator in the enclosed envelope.

This information is kept separate from your application and is used for statistical purposes only.

Submission of this information is completely voluntary and will be kept confidential.

Mountrail County Title VI Coordinator

Enclosures

APPLICATION FOR EMPLOYMENT

SUMMER WEED WORKER

This application is only for the position of Weed Sprayer, as advertised in the March 18 and 25, 2026 issues of the county official newspaper.

Thank you for your interest in employment with Mountrail County. Mountrail County is an Equal Opportunity Employer. Applicants are considered for all positions without regard to race, color, religion, national origin, age, sex, political beliefs, disability, or status with respect to marriage or public assistance and complies with the provisions of the North Dakota Human Rights Act.

Applications will be accepted until position is filled at the Office of the Mountrail County Human Resources Department, PO Box 69, 101 N Main Ave, Stanley ND 58784.

GENERAL INFORMATION		
LAST NAME	FIRST NAME	MI
MAILING ADDRESS		
CITY	STATE	ZIP
PHONE #		
EMAIL ADDRESS <i>By providing your email address, you hereby consent to receive all future notifications related to this application via email.</i>		
Can you provide proof, <i>if hired</i> , that you are eligible to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		
On what date would you be available to work?		

EDUCATION / TRAINING	
Are you at least 18 years of age or older?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you graduate from High School or receive a GED Certificate?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other Education/Training	

QUALIFICATIONS

EMPLOYMENT / PROFESSIONAL REFERENCES		
Please list as references, three people that have knowledge of you and your qualifications. No relatives please.		
NAME	ADDRESS (City/State/Zip)	PHONE # (Work/Cell)

VETERAN'S PREFERENCE

To claim Veteran's Preference, you must be a US resident and have served in the active military forces during a period of war or received the armed forces expeditionary or other campaign service medal during an emergency condition and must have been released under other than dishonorable conditions. Refer to NDCC 37-19-1.

ARE YOU CLAIMING PREFERENCE AS A:

- Veteran? No Yes; *must attach DD-214 & Report of Separation*
- Disabled Veteran? No Yes; *must attach DD-214, Report of Separation & a letter less than one year old from VA indicating disability*
- Spouse of Disabled Veteran? No Yes; *must attach DD-214, Report of Separation & a letter less than one year old from VA indicating disability*
- Spouse of Deceased Veteran? No Yes; *must attach DD-214, Report of Separation & Veteran's death certificate*

EMPLOYMENT EXPERIENCE

Attach a separate sheet of paper for any additional employment history.

NAME OF MOST CURRENT EMPLOYER	PHONE #
JOB TITLE	LENGTH OF EMPLOYMENT
DUTIES & RESPONSIBILITIES	
REASON FOR LEAVING OR CONSIDERING LEAVING CURRENT EMPLOYMENT	

NAME OF EMPLOYER	PHONE #
JOB TITLE	LENGTH OF EMPLOYMENT
DUTIES & RESPONSIBILITIES	
REASON FOR LEAVING EMPLOYMENT	

NAME OF EMPLOYER	PHONE #
JOB TITLE	LENGTH OF EMPLOYMENT
DUTIES & RESPONSIBILITIES	
REASON FOR LEAVING EMPLOYMENT	

DISCLAIMER

I certify that my answers are true and complete to the best of my knowledge and that I am at least 18 years of age. I certify that I have not had a criminal driver's record on abstract for the past five (5) years. I authorize Mountrail County to perform a pre-employment background check. I acknowledge I must pass a pre-employment drug and/or alcohol testing if offered a position in accordance to Mountrail County's "Drug & Alcohol Use & Testing Policy". If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature of Applicant

Date