

**Application for Employment**

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| We welcome you as an applicant for employment with the City of Deerwood. It is the City of Deerwood's policy to provide equal opportunity in employment. The City of Deerwood will not discriminate on the basis of race, color, creed, age, religion, national origin, marital status , disability, sex, sexual orientation, familial status, status with regard to public assistance, local human rights commission activity or any other basis protected by law.  Please furnish complete information, so we may accurately and completely assess your qualifications. You may attach any other information which provides additional detail about your qualifications for employment in the position you seek. Please refer to the Applicant Data Practices Advisory for information regarding what is considered public and private information as an applicant, and if you are selected for the position, as an employee.  The City of Deerwood accommodates qualified persons with disabilities in all aspects of employment including the application process. If you believe you need a reasonable accommodation to complete the application process, please contact City Hall at 218-534-3152. |

**DATA PRIVACY NOTICE**

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| The information requested on this application is intended to be used by the City in determining suitability for employment for the position which you are currently seeking or may seek in the future. If hired, the information may later be used for consideration for other positions, verification of employment history or disciplinary action in the event that the information provided is not truthful. You are not legally required to provide any of the information on this form at this time. However, failure to provide complete, accurate information may result in the City being unable or unwilling to offer employment to you. With respect to any special accommodations necessary for completing your application or the interview process, the City may be unable to provide the necessary accommodations if you do not provide the information requested. The information on this application that is classified as private data under the Minnesota Government Data Practices Act (MGDPA) will not be released outside the City without your consent except as necessary for tax purposes or as otherwise required by state or federal law. Information that is classified as public data will be released pursuant to the terms of the MGDPA. |

**Please print in INK or type when completing this application**

**Personal Information**

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| --- | --- | --- | --- |
| Name: | (Last) | (First) | (Ml) |
| Street Address |  |  |  |
| City, State, Zip |  |  |  |
| Phone Number |  |  | Alternate Phone |
| Email |  |  |  |

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| Title of position applying for: |
| Date Available to Begin Employment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| Are you legally eligible to work in the United States in the position for which you are applying?  *Proof of citizenship or work eligibility will be required as* a *condition of employment.* | Yes No |
| Are you at least 18 years old? | Yes No |

List all other names under which you have been employed or under which your employment or educational records may be found: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Have you previously worked for the City of Deerwood? Yes \_\_\_\_\_ No \_\_\_\_\_  If yes, position held/department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  If yes, under what name may your previous employment records be found? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Educational Information**

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| --- | --- | --- | --- |
| **Circle the highest grade completed** | | | |
| 1 2 3 4 5 6 7 8  Grade School | 9 10 11 12 GED  High School | 13 14 15 16  College/Technical | MA MS PHO JD  Graduate |
| Did you graduate :  (Please check) | Yes No  *High School* | Yes No  *College/Technical* | Yes No  *Graduate/ JD* |

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| --- | --- | --- | --- |
| School Nam | Address | Course of Study | Degree |
| High School: |  |  |  |
| College: |  |  |  |
| Graduate School: |  |  |  |
| Technical/Vocational: |  |  |  |
| Other: |  |  |  |
| Other: |  |  |  |

List any other courses, seminars, workshops, or training you have that may provide you with skills related to this position:

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| List current licenses, registrations, or certificates relevant to the position for which you are applying. |

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| License/No. Issued By Date Expiration  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  *All applicable licenses or certifications must be received in the City prior to employment commencing.* *If hired, you remain responsible for ensuring that all applicable licenses remain in effect.* |

**Employment Experience**

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| List all work experience, whether or not relevant to this position, and all relevant volunteer experience, starting with the most recent. Please note "see resume" is not an acceptable response for any entries on this application. Resumes will only be considered in addition to, but not in lieu of, this application. |

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| Company | Name of last supervisor | Hrs./Week |
| Address | Start Date | Starting Salary |
| City, State, Zip | End Date | Final Salary |
| Phone Number | Last job title | |
| Reason for leaving (be specific): | | |
| Describe your work in this job | | |
| May we contact this employer? Yes No | | |

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| --- | --- | --- |
| Company | Name of last supervisor | Hrs./Week |
| Address | Start Date | Starting Salary |
| City, State, Zip | End Date | Final Salary |
| Phone Number | Last job title | |
| Reason for leaving (be specific): | | |
| Describe your work in this job | | |
| May we contact this employer? Yes No | | |

|  |  |  |
| --- | --- | --- |
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| Address | Start Date | Starting Salary |
| City, State, Zip | End Date | Final Salary |
| Phone Number | Last job title | |
| Reason for leaving (be specific): | | |
| Describe your work in this job | | |
| May we contact this employer? Yes No | | |

|  |  |  |
| --- | --- | --- |
| Company | Name of last supervisor | Hrs./Week |
| Address | Start Date | Starting Salary |
| City, State, Zip | End Date | Final Salary |
| Phone Number | Last job title | |
| Reason for leaving (be specific): | | |
| Describe your work in this job | | |
| May we contact this employer? Yes No | | |

**Unsalaried Experience**

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| Describe any unsalaried or volunteer experience relevant to the position for which you are applying (you may exclude, if you wish, information which would reveal race, sex, religion, age, disability, or other protected status). |

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| REFERENCES: These should be people in a position to discuss your qualifications for the position you seek. Include especially managers, directors, or heads of departments under whom you have worked. Indicate any who are related you. The City reserves the right to contact all prior employers, educational institutions or institutions where you have volunteered in addition to references listed below.  Name of Reference: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name of Reference: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name of Reference: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Military Experience**

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| Are you an honorably discharged veteran of the armed forces of the United States or are you otherwise eligible to claim Veteran’s Preference Points? Yes \_\_\_\_\_ No \_\_\_\_\_  Are you the spouse of deceased honorably discharged veteran or disabled veteran who is unable to work due to such disability? Yes \_\_\_\_\_ No \_\_\_\_\_  Do you wish to claim Veteran’s Preference Points? Yes \_\_\_\_\_ No \_\_\_\_\_  If you are a disabled veteran and wish to claim additional points, please check here. \_\_\_\_\_  Proof of applicable military status/eligibility, such as a DD214 form, will be required in order to claim credits. Please attach DD214 form or forward it within five (5) business days.  If you receive a passing score, you will be shown your score upon request. |

**Criminal Background Check**

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| The City will request information regarding criminal history in the event that you become a finalist for the position for which you are applying. For certain positions, criminal background information will be requested during the application stage. Further, the City may conduct a criminal background check on individuals upon making a contingent job offer. Please refer to the job description for this position to determine if such a check will be conducted. If the job description or other application material states that a criminal check will be conducted, no offer of employment shall become final until receipt of the results of the criminal background check from the BCA, the content of which is acceptable to the City, and formal approval by the appointing authority. |

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| **PERSONAL STATEMENT**  Please indicate why you are interested in the position and what you hope to accomplish if you are selected: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **UNEXCUSED ABSENCE FROM WORK**  How many days were you inexcusably absent from work during the preceding three (3) years other than absences due to illness or injury of you or your immediate family? \_\_\_\_\_\_\_ |

**Certification, Acknowledgement, Authorization, and Release**

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| I **certify** that all information I have provided in this application for employment is true and complete to the best of my knowledge. I understand that any false or misleading information provided, or any misrepresentation ion, concealment, or omission of any fact in my application, resume or any other materials, or during any interviews, will disqualify me from consideration for employment and constitutes grounds for my immediate dismissal, should I be employed by the City, regardless of length of employment or when the misrepresentation ion or omission is discovered.  I **understand, acknowledge, and agree** that I have received a copy of the job description summary for the position/s for which I am applying, that no offer of employment is valid or binding until formal approval by the City Council or the appointing authority referenced in the job description, and that, until such approval, the City shall not be liable for any reliance on any oral or written offers of employment made to me. I further acknowledge my understanding that employment with the City of Deerwood is "at will," and that employment may be terminated by either the City of Deerwood or me at any time, with or without notice. I also understand it is my responsibility to notify the City of Deerwood in writing of any changes to information reported in this application for employment.  In connection with this application, **I hereby authorize** any and all current and former employers, organizations where I have volunteered (“volunteer organizations”) and reference named in this application, and any agent of such a former employer or volunteer organization, to release to the City and its agents any and all information regarding my job performance and fitness/qualifications to perform the position I am presently seeking and any other employment or related information, both public and private, in their possession. I understand that the City will use this information to determine my fitness/qualifications for the position I am seeking. This authorization expires one year from the date of my signature below.  **I hereby release** the City of Deerwood and al former employers, volunteer organizations, and references listed herein and any and all employees, Council members, insurers, attorneys, and agents acting on behalf of said City, former employers, volunteer organizations, or references, for any and all liability of whatever nature by reason of requesting or providing such information. |

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Signature Date

**Equal Employment Opportunity Information**

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| The information asked of you will be used to evaluate our overall efforts in reaching all segments of the population. The following information is VOLUNTARY and CONFIDENTIAL. This information is NOT A PART of the application file and is REMOVED from the application when received by our office. The City of Deerwood appreciates your cooperation in our efforts to ensure affirmative action and equal opportunity. |

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| Position(s) for which you are applying: |
| Gender:  Male  Female |
| With which racial/ethnic group do you identify?   * Black or African American * Hispanic or Latino * American Indian or Alaskan Native through Tribunal affiliation or community recognition * Caucasian/White * Asian * Native Hawaiian or other Pacifica Islander * Two or more races |
| Disability status, defined as:   1. Has a physical or mental condition that substantially or materially limits a major life activity (such as walking, talking, seeing, hearing or learning); 2. Has a history of a disability (such as cancer that is in remission); 3. Is regarded as having such an impairment.   Do you claim disability status? Yes No |

DATA PRACTICE RELEASE FORM

### General Authorization and Release Pursuant to Minn. Stat. Sec. 13.05, subd. 4, Minnesota Data Practices Act

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[printed name], pursuant to the Minnesota Government Data Practices Act (Minn. Stat. Ch. 13) and all other applicable laws, both statutory and common law, hereby authorize the City of Deerwood and its employees, agents and representatives, to disclose to, release and discuss with the City of Deerwood, Minnesota, and its employees, agents, and representatives, any and all data in its possession which in any way relate to me, other than “consumer reports,” as that term is defined in the United States Fair Credit Reporting Act.

I specifically agree and authorize the release of private data about myself, as that term is defined under Minnesota Statutes Chapter 13.

In connection with this authorization for release of information, I hereby release the City of Deerwood, and all of their current and former employees, officers, Council members, Board members, agents, or representatives from any and all manner of liability of whatever nature by reason of requesting or providing such information.

I understand that I am not legally required to sign this authorization and that I may revoke my consent in writing at any time. I understand that the failure to authorize the release of this information may adversely impact my application for employment. The information gathered may be shared with individuals involved in the hiring decision or other individuals within the organization in the event that I am hired, for employment related purposes. The information may also become public pursuant to the provisions of Minn. Stat. § 13.43.

I understand that this authorization shall continue in full force and effect following the date of my signature unless specific written revocation is sent to the City Clerk by certified mail. A photocopy of this authorization is to be treated in the same manner as the original

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature