

City of Minnesota Lake
 103 Main St N. PO Box 98
 Minnesota Lake MN 56068
 (507) 462-3277

Date Rec'd: _____
 Time: _____

**APPLICATION FOR EMPLOYMENT
 POLICE OFFICER**

Applicants must have a MN Police Officer Standard & Training Board Peace Officer license or be eligible to be licensed by the application deadline date. Applications will be reviewed and ranked regarding education, experience, and training for future consideration.

It is our policy to provide equality of opportunity in employment. The information requested by this application is either public or private data (see below for definitions) and will be used only in conjunction with your possible employment. You may refuse to supply the data requested by this form, however, such refusal may eliminate you from consideration for the employment position you are seeking with this application. You are encouraged to attach any additional information, which you believe qualifies you for the position.

PLEASE PRINT IN INK OR USE TYPEWRITER.
 The following information is Public Data on individuals, which is accessible to the public unless otherwise indicated.

Position applied for: _____ Date Available: _____

Kind of work applied for: Permanent Part-time Temporary Seasonal

Personal Information

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

P.O.S.T. Lic. # _____ (must provide copy)

Are you currently employed? Yes/No

Have you ever applied here before? Yes/No ____ When? _____

How did you hear of this opening? _____ Referred by: _____

Are you legally eligible to work in the United States in the position for which you are applying? <i>Proof of citizenship or work eligibility will be required as a condition of employment.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will your continued employment require employer sponsorship?"	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you at least 21 years old?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Educational Information

Circle the highest grade completed			
5 6 7 8 Grade School	9 10 11 12 GED High School	13 14 15 16 College/Technical	MA MS PHD JD Graduate
Did you graduate: (Please check)	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>High School</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>College/Technical</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>Graduate JD</i>

School Name	Address	Course of study	Degree
High School:			
College:			
Graduate School:			
Technical/Vocational:			
Other:			
Other:			

EMPLOYMENT HISTORY

Please list past employers beginning with your most recent employment. If necessary, attach separate sheet of paper for additional employers.

Employer's Name: _____ <i>Street</i> <i>City</i> <i>State</i> <i>Zip</i>
Employment Dates: From _____ to _____ Phone: () _____
Position Held: _____ <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Duties Performed: _____
Starting Salary _____ per/ _____ Final Salary _____ per/ _____
Reason for Leaving: _____

Employer's Name: _____ <i>Street</i> <i>City</i> <i>State</i> <i>Zip</i>
Employment Dates: From _____ to _____ Phone: () _____
Position Held: _____ <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Duties Performed: _____
Starting Salary _____ per/ _____ Final Salary _____ per/ _____
Reason for Leaving: _____

Employer's Name: _____ <i>Street</i> <i>City</i> <i>State</i> <i>Zip</i>
Employment Dates: From _____ to _____ Phone: () _____
Position Held: _____ <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Duties Performed: _____
Starting Salary _____ per/ _____ Final Salary _____ per/ _____
Reason for Leaving: _____

Employer's Name: _____ <i>Street</i> <i>City</i> <i>State</i> <i>Zip</i>
Employment Dates: From _____ to _____ Phone: () _____
Position Held: _____ <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Duties Performed: _____
Starting Salary _____ per/ _____ Final Salary _____ per/ _____
Reason for Leaving: _____

May we contact your present or past employers? _____ Yes _____ No

RELATED LAW ENFORCEMENT EXPERIENCE

Include paid or volunteer work, including police reserve, community service officer, military police, corrections, etc., not included in "Employment History" section.

Agency Name: _____
Agency Address: _____
Job Title: _____
Job Duties: _____

From: _____ To _____

Agency Name: _____
Agency Address: _____
Job Title: _____
Job Duties: _____

From: _____ To _____

Agency Name: _____
Agency Address: _____
Job Title: _____
Job Duties: _____

From: _____ To _____

Agency Name: _____
Agency Address: _____
Job Title: _____
Job Duties: _____

From: _____ To _____

OTHER RELATED TRAINING/EDUCATION

Include training/education associated with law enforcement, such as first aid, fire training, computer skills, etc. List any current licenses, registrations, or certificates you possess which may relate to this position.

School Name: _____
School Address: _____
Class Attended: _____
Dates: _____ Hours: _____

School Name: _____
School Address: _____
Class Attended: _____
Dates: _____ Hours: _____

School Name: _____
School Address: _____
Class Attended: _____
Dates: _____ Hours: _____

School Name: _____
School Address: _____
Class Attended: _____
Dates: _____ Hours: _____

REFERENCES

Please list the names, phone numbers, and addresses (including zip codes) of three (3) references not related to you by blood or marriage and not connected with your present employment.

Name: _____ Phone #: _____

Address: _____

Name: _____ Phone #: _____

Address: _____

Name: _____ Phone #: _____

Address: _____

CONVICTION INFORMATION -- The existence of a criminal record will not automatically disqualify you from consideration for employment.

Have you ever been convicted as an adult for a criminal violation? Yes No

If yes, _____
Date Place Nature of Offense Disposition

Date Place Nature of Offense Disposition

PERSONNEL INFORMATION

The following personnel information is private data on an individual, which is accessible only to yourself and the person who is specifically authorized access to the data in connection with your possible employment and for no other use, without your prior informed consent.

Gender Male Female

Do you have any Physical or Health limitations, which may affect your work performance?
 Yes No If yes, please explain: _____

If you are not a citizen of the United States, do you have Bureau of Immigration approval to work in the U.S.? Yes No

Unpaid Experience

Describe any unpaid 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).

Military Experience

Did you serve in the U.S. Armed Forces? Yes No

Describe your duties _____

Do you wish to apply for Veterans' Preference points: Yes No

If you answered "yes," you must complete the enclosed application for Veterans' Preference points, and submit the application and required documentation to the City of Minnesota Lake by the application deadline of the position for which you are applying.

Authorization

I certify that all information I have provided in this application for employment is true and complete to the best of my knowledge. Any misrepresentation or omission of any fact in my application, resume or any other materials, or during any interviews, can be justification for refusal of employment, or if employed, will be grounds for dismissal, regardless of length of employment or when the misrepresentation or omission is discovered.

I acknowledge that I have received a copy of the job description summary for the position/s for which I am applying. I further acknowledge my understanding that employment with the City of Minnesota Lake is "at will," and that employment may be terminated by either the City of Minnesota Lake or me at any time, with or without notice.

With my signature below, I am providing the City of Minnesota Lake authorization to verify all information I provided within this application packet, including contacting current or previous employers. However, I understand that if, in the Employment Experience section I have answered "No" to the question, "May we contact your current employer?", contact with my current employer will not be made without my specific authorization.

I further understand that criminal history checks may be conducted (after I have been selected for an interview, in the case of non-public safety positions) and that a conviction of a crime related to this position may result in my being rejected for this job opening. I also understand it is my responsibility to notify the City of Minnesota Lake in writing of any changes to information reported in this application for employment.

Signature

Date

Veterans' Preference

COMPLETE THIS FORM ONLY IF YOU ARE CLAIMING VETERANS' PREFERENCE

NOTE: VETERANS' PREFERENCE POINTS CANNOT BE CONSIDERED WITHOUT SUPPORTING DOCUMENTATION. ATTACH COPY OF "MEMBER COPY 4" VETERAN'S DD214, OR OTHER DOCUMENTATION VERIFYING SERVICE. DOCUMENTATION MUST BE RECEIVED SEVEN DAYS AFTER THE APPLICATION DEADLINE OF THE POSTING IN ORDER TO BE CONSIDERED. (VETERAN IS DEFINED BY MINN. STAT. § 197.447)

You must submit a PHOTOCOPY of your "Member Copy 4" of your DD214 or other documentation verifying service to substantiate the services information requested on the form. Claims not accompanied by proper documentation will not be processed. For assistance in obtaining a copy of your "member Copy 4" of your DD214, or other documentation verifying service, contact your County Veterans' Service Office.

The City of Minnesota Lake operates under a point preference system, which awards points to qualified veterans to supplement their application. Ten (10) points are granted to non-disabled veterans on open competitive examinations; Fifteen (15) points are awarded if the veteran has a service connected compensable disability as certified by the U.S. Department of Veterans Affairs (USDVA).

To qualify for preference for a **competitive exam**, you must have earned a passing score and been separated under honorable conditions from any branch of the armed forces of the United States after having served on active duty for 181 consecutive days, **or** by reason of disability incurred while serving on active duty, **or** after having served

the full period called **or** ordered for federal, active duty **and** be a United States citizen or resident alien. Veteran's preference may be used by the surviving spouse of a deceased veteran, who died on active duty or as a result of active duty, and by the spouse of a disabled veteran who is unable to qualify because of the disability.

To qualify for preference on a **promotional exam**, a veteran must have earned a passing exam score and received a USDVA active duty service connected disability rating of 50% or more. For a promotional exam, a qualified disabled veteran is entitled to be granted five (5) points. Disabled veterans eligible for such preference may use the five points preference only for the first promotion after securing employment with the City of Minnesota Lake.

Claims must be made on the form below and submitted with your application by the application deadline of the position for which you are applying. If the "Member Copy 4" DD214, or other documentation verifying service, is submitted to our office separate from this sheet, please attach a note with it indicating the position for which you are applying and your present address.

Name (Last) (First) (MI)	Position For Which You Applied	
Address (Street) (City) (State) (Zip)	Closing Date:	Are you a US Citizen or Resident Alien?
	Phone Number	<input type="checkbox"/> YES <input type="checkbox"/> NO

VETERAN (10 points):

("Member Copy 4" of DD214 or DD215, or other documentation verifying service, must be submitted to receive points)
 Honorably discharged veteran Yes No

DISABLED VETERAN (15 points):

("Member Copy 4" of DD214, or other documentation verifying service, and USDVA letter of disability rating decision of 10% or more must be submitted to receive points)
 Percent of Disability: _____%
 Have you ever been promoted within the City of Minnesota Lake employment? Yes No

SPOUSE OF DECEASED VETERAN (10 points or 15 if the veteran was disabled at time of death):

("Member Copy 4" of DD214 or DD215, or other documentation verifying service, photocopy of marriage certificate, spouse's death certificate and proof veteran died on or as a result of active duty must be submitted to receive points. You are ineligible to receive points if you have remarried or were divorced from the veteran).
 Date of Death: _____ Have you remarried? Yes No

SPOUSE OF DISABLED VETERAN (15 points):

("Member Copy 4" of DD214 or DD215, or other documentation verifying service, and USDVA letter of disability rating decision of 10% or more must be submitted to receive points).
 How does Veteran's disability prevent performance of a stated job "requirement?" Due to the veteran's service-connected disability the veteran is unable to qualify for this position because (be specific):

AFFIDAVIT: I hereby claim Veterans' Preference points for this examination and swear/affirm that the information given is true, complete and correct to the best of my knowledge. I hereby acknowledge that I am responsible to obtain the required Veterans' Preference verification documents and submit them to the City of Minnesota Lake by the required application deadline.

Signature _____

Date _____

Information Regarding Claiming Veterans' Preference

Preference points are awarded to qualified veterans as defined by Minn. Stat. § 197.477, and to certain spouses of deceased or disabled veterans subject to the provision of Minn. Stat. §§ 197.447 and 197.455.

The veteran must:

- a) be a U.S. citizen or resident alien;
- b) have received a discharge under honorable conditions from any branch of the U.S. Armed Forces; AND have either:
 - i. served on active duty for at least 181 consecutive days, or
 - ii. have been discharged by reason of service connected disability, or
 - iii. have completed the minimum active duty requirement of federal law, as defined by CFR title 38, section 3.12a, i.e., having fulfilled the full period for which a person was called or ordered to active duty by the United States President, or
 - iv. certified service and verification of "veteran status" granted under U.S. PL 95-202.

The information provided will be used to determine your eligibility for veterans' preference points. You are required to supply the following information:

- 1) Attach a copy of the "Member Copy 4" of your DD214 or DD215, or other documentation verifying service. This copy must state the nature of discharge; i.e., honorable, general, medical, under honorable conditions.
- 2) Disabled veterans must also supply a Military/United States Department of Veterans' Affairs Rating Decision that supports/verifies the fact that the injury was incurred while on, or as a result of, active duty service. Disability incurred while on, or as a result of, active duty for training purposes does not qualify for disabled veteran preference per Minn. Stat. §§ 197.455 and 197.447.
- 3) A spouse of a deceased veteran, applying for preference points must supply their marriage certificate, the veteran's "Member Copy 4" DD214 or DD215, or other documentation verifying service, USDVA verification that veteran died on or as a result of active duty, a death certificate, verification of their marriage at the time of veteran's death, and that the spouse has not remarried.

Thank you for your military service and for your interest in employment with the City of Minnesota Lake. Please contact our office at 507-462-3277 or your local County Veterans' Service Office, if you have any questions regarding veterans' preference.

Equal Employment Opportunity Information

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 Minnesota Lake appreciates your cooperation in our efforts to ensure affirmative action and equal opportunity.

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 Tribal affiliation or community recognition
- Caucasian/White
- Asian
- Native Hawaiian or other Pacific 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

REFERRAL SOURCE: *How were you made aware of this employment opportunity?*

- City Website MN POST Faribault Cty Register
- Wells Shopper Mn Lake Tribune Indeed website
- MnWorks Maple River Messenger Employee Other _____

Applicant Data Practices Advisory

The Minnesota Government Data Practices Act (Minn. Stat. §§ 13.01 – 13.90) includes two sections affecting applicants seeking employment with the City of Minnesota Lake. First, under “Rights of Subjects of Data” (Minn. Stat. § 13.04), when an applicant is asked to provide information about him/herself, the City must advise you of:

- The purpose and intended use of the data;
- Whether you may refuse or are legally required to supply the requested data;
- Any known consequences arising from your supplying or refusing to supply the data; and
- The identity of other persons or organizations authorized by State or Federal law to receive the data you provide.

Second under “Personnel Data” (Minn. Stat. §13.43) the following data on you as an applicant for employment by a public agency is automatically public:

- Your veteran’s status;
- Your job history;
- Your education and training;
- Your relevant test scores;
- Your rank on our eligibility list; and
- Work availability.

As an applicant, your name is considered private until you are certified as eligible for appointment to a position or are considered by the appointing authority to be a finalist for a position in public employment.

If you are hired, the following additional data about you will be considered public information:

- Your name;
- Your employee identification number (which is not your Social Security number);
- Your actual gross salary, contract fees, salary range, and actual gross pension;
- The value and nature of employer paid benefits;
- The basis for and the amount of any added remuneration, including expense reimbursement, in addition to your salary;
- Your job title, bargaining unit (if applicable) and job description;
- The dates of your first and last employment with us;
- The status of any written complaints or charges against you while you work for the City of Minnesota Lake, regardless whether or not they have resulted in disciplinary action, the final disposition of any disciplinary action and supporting documentation;
- Your work location and work telephone number;
- Your education and training background;
- Work-related continuing education;
- Honors and awards you have received;
- Payroll timesheets or other comparable data that are only used to account for your works time for payroll purposes: except to the extent that release of time sheet data would reveal employee’s reasons for the use of sick or other medical leave or other non-public data;
- Your previous work experience;

Applicant Data Practices Advisory Cont'd.

- The “complete” terms of any settlement agreement (including buyout agreements) except that the agreement must include the specific reasons if it involves the payment of more than \$10,000 of public money; and
- Your badge number. This data is private if the candidate is applying for or is hired for an undercover law enforcement position.

All data concerning you which is placed in your personnel file and which is not addressed in statute as public data (see above listing) is private data. This private data will be available to you and those members of city staff needing it to process city records. In addition, the following persons or organization are authorized by state and federal law to receive this data if they so request in certain circumstances:

- The Bureau of Census;
- Federal, State and County Auditors;
- The State Department of Public Welfare;
- The Department of Human Rights;
- Federal Officials investigating compliance of Affirmative Action and Equal Employment Opportunities;
- Labor organizations and the Bureau of Mediation Services;
- Data may also be made available through court order.

With the exception of the optional data requested, the data you provide is needed to identify you and you assist in determining your suitability for the position for which you are applying. The optional data is used in summary form by the city's Affirmative Action Program to monitor protected class employment and meet federal, state and local reporting requirements. Furnishing the optional data requested about you is voluntary.

NOTICE REGARDING SOCIAL SECURITY NUMBER: This information will be used for payroll taxes, insurance purposes, and retained in the employee's data record.

NOTICE TO MINORS: Minors from whom private data or confidential data is collected have the right to request that parental access to the private data be denied.

If you have any questions regarding your rights as a subject of data, please contact the City of Minnesota Lake's City Clerk at PO Box 98, Minnesota Lake, MN 56068. **This information is subject to change consistent with subsequent amendments to the Minnesota Government Data Practices Act.**

NOTICE REGARDING REQUEST FOR MARRIAGE CERTIFICATE FOR VETERANS' PREFERENCE DOCUMENTATION: This information will be used for documentation purposes for verifying marital status for requesting applicable spousal Veterans' Preference credits.

EMPLOYEE CERTIFICATION

Please be sure to sign this application and read the following statements carefully:

1. I certify that all the information I have provided on this application is true and complete to the best of my knowledge. I understand that giving false information or omitting information could result in rejection of my application or dismissal if I am hired.
2. I authorize the City of Minnesota Lake and its agents and/or representatives to verify this information to determine whether or not I am qualified for the position for which I am applying.
3. I understand that only the City Council has the authority to make employment agreements.
4. I hereby authorize all current and previous employers and schools to release to the City of Minnesota Lake data classified as private. The data which I authorize to be released consists of private data as defined by M.S. 1302, Subd. 12 and has been or will be collected by the City of Minnesota lake and/or its agents and/or representatives. This information includes all data which has been collected, created, received, retained or disseminated in whatever form which is in any way related to employment. I fully understand that the purpose of permitting the City of Minnesota Lake to have access to this information is to determine my suitability for employment for the position of Public Works Worker. I release all parties from any and all liability and claims for damage whatsoever that may result there from.

This authorization shall be valid for one year, but I reserve the right to, at any time prior to expiration, cancel this authorization by providing written notice to the City Council of the City of Minnesota Lake.

I also acknowledge that a photocopy of this authorization may be used in lieu of the original and that a photocopy shall be considered as valid as the original.

Name: _____

Signature: _____

Date: _____

MINNESOTA DATA PRACTICES ACT

TENNESSEN WARNING

The Minnesota Data Practices Act seeks to protect the privacy of individuals about whom government agencies and their subdivisions, and agencies under contact with the government collect data. The Act also facilitates a release of information, which is public. The information on this sheet applies to your current and future contacts with the City of Minnesota Lake, whether the contact is in person, by mail, or by phone.

The Act requires that whenever the city ask you to provide information, which is private or confidential, that you be told:

1. The purpose and intended use of the data within the City;
2. The legal requirements, if any, of providing the information;
3. The consequences of providing or refusing to provide the information requested;
4. The identity of other persons or agencies authorized by statute to receive the information.

I. Purpose of the information collected:

1. Determine whether you meet City requirements pertaining to the eligibility for employment.
2. Evaluate the employment application.
3. Investigate the accuracy of all information and statements contained in the application.
4. Investigate and collect background information pertaining to you to determine your qualifications and fitness for employment with the City.

II. Legal Requirements

You are not legally required to provide the information requested. If you do not provide the information requested, the City will not be able to determine your eligibility for employment and your application will, in all likelihood, be denied if you do not provide the information requested.

III. Sharing of Information

The data provided pursuant to the employment application may be shared with officers and employees of the City who have a need to know such information in order to process and make a decision on a recommendation concerning your employment, and ultimately a determination by the governing body concerning your employment.

1. This information may be provided to others in the following circumstances:
 - a. To individuals, persons, agencies, institutions or organizations you authorize sharing the information with by means of a valid consent for release of information.
 - b. To appropriate law enforcement personnel who are acting in an investigation on proceedings relating to the application.
 - c. To a Court pursuant to a valid court order.

IV. Other Rights:

You have the right to know what information is maintained about you; you have the right to view all public and private information about you maintained by the City, and this includes the right for you to authorize other persons or agencies to view it.

1. You have the right to have the data to which you have accessed explained to you.
2. You have the right to request copies of the information to which you have access, but you may be charged a reasonable fee for the cost of the copies.
3. You have the right to challenge the accuracy or completeness of any private information in your records. If you want to challenge any information, you must write to the City. You may also talk to the individual at the City with whom you are working. Your challenge will be answered within thirty (30) days.
4. You have the right to insert your own explanation of anything you object to in your records. That explanation will be attached anytime the information is shared with another agency. You have the right to appeal decisions made by the City about the accuracy to completeness of your records to the Commissioner of Administration, Data Privacy Act, State of Minnesota, 51 Sherburne Avenue, St. Paul, MN 55155.

If you do not understand this document, or if you have further questions, you should discuss these with the City staff person to whom you provided the statement.

I have read this explanation of my privacy rights and understand the purposes and consequences of giving the information and who is authorized to use it.

Applicant Signature

Date

