# CITY OF ANNANDALE EMPLOYMENT APPLICATION

(PLEASE BE SURE HANDWRITING IS CLEARLY LEGIBLE)				
Last name	First N	Vame	Middle Name	
Address		City	State	Zip Code
Home Telephone ( ) —	Mobile Telephone ( ) —	Email Address Please		
Position Applied For			Date Application is Submitted	
Please tell us how you learned  Annandale Advocate I	about this position, as it will be LMC Website Posting	=	ertise for our next hiring.	
Friend, Relative	☐ Newspaper article	Other		
How best may we contact yo	ou: home only, work is okay, t	imes, numbers, etc.		
	?			☐ No
Immigration Status?	fully becoming employed in the second status will be required			☐ No
Are you currently on "lay off" status and subject to recall?			☐ No	
Do you have a High School diploma?			☐ No	
Do you have a bachelor's de	gree?  Yes, what degree	e(s)?		☐ No
Have you ever been fired, or	forced to resign from a positi	on? If so, explain on a se	parate sheet Yes	☐ No
Do you have a valid driving	license? (Note the state if <u>not</u>	issued by the State of Min	nnesota) Yes	☐ No
			uld accompany this application. I lease contact City Hall before con	
Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities typically associated with the position for which you are applying and specifically those listed in the <i>Position Description</i> ?			ly	
	YES	No		

# **EDUCATION**

	Name and City of School	Grade Point Average	No. of Years Completed	Type of Diploma/Degree(s)
High School				
College				
Post Graduate				

Post Graduate				
individuals that can spe	REFERE  num of three professional references. These she eak specifically to your abilities and character a refer. Be advised that the City will likely conta	ould <u>exclude</u> fa	al. You may provid	le your list of references on a
(Name) (Address)			Daytime Phone  Evening Phone	
2 (Name) (Address)			Daytime Phone  Evening Phone	
(Name)			Daytime Phone  ()  Evening Phone	
(Address)			Evening 1 none	
Describe any specia	l qualifications or certifications you poss	sess relative	to the position	

## **EMPLOYMENT EXPERIENCE**

List your <u>most recent</u> employers over the past 10 years, beginning with your present or most recent job. Include any job-related military service assignments and volunteer activities. You may provide a summary of your employment history on a separate document; however, be sure to indicate below if you've elected to do so. You may exclude employers which indicate race, color, religion, gender, national origin, disabilities or other protected status. Applicants who elect not to report salary information may be eliminated from consideration specifically for that reason.

1. Most Recent (or current) Employer		Dates Employed		
		From	To	Work Performed
Address		Month/Year	Month/Year	
Address				
Telephone Number(s)		Hourly R	l ate/Salary	
relephone (value)		Starting	Final	
Job Title	Supervisor	28	2 22202	
	•			
Reason for Leaving (or wanti	ng to leave)	Hours/Week	Hours/Week	
2. Prior Employer		Dates En	mployed	
		From	То	Work Performed
		Month/Year	Month/Year	
Address				
Telephone Number(s)		Hourly R		
Job Title	Supervisor	Starting	Final	
Job Title	Supervisor			
Reason for Leaving		Hours/Week	Hours/Week	
Reason for Leaving		Hours/ week	Hours/ week	
3. Prior Employer		Dates Er	mployed	
3. Thoi Employer		From	То	Work Performed
		Month/Year	Month/Year	
Address				
Telephone Number(s)		Hourly Ra		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving		Hours/Week	Hours/Week	
		1		1

## APPLICANT'S STATEMENT

All applicants are required to sign this Application to receive consideration. By virtue of your signature the applicant certifies and acknowledges the following:

- 1. That answers given herein are true and complete.
- 2. Investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision is hereby authorized.
- 3. The Applicant understands and acknowledges that, unless otherwise defined by applicable law, any employment relationship with the City of Annandale is of an "at will" nature, which means that the employee may resign at any time and the City may discharge the employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by the City of Annandale.
- 4. Minnesota State Statutes provide that the name of a candidate for this position is public data once that individual is a finalist for the position. The City tries to use discretion and typically releases this information only upon request, but it is obligated to release the information for all finalists.
- 5. That the City is hereby authorized to make contact with my present employer(s), but that such contact shall <u>not</u> be made unless I am a finalist for the position. The Applicant acknowledges that they may be deemed a "finalist" from the moment that they are chosen by the City of Annandale for an interview for this position.
- 6. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the City.

Signature of Applicant	Date

#### TENNESSEN WARNING

In accordance with the Minnesota Government Data Practices Act, the City of Annandale is required to inform you of your rights as they relate to the private information collected from you. Private data is information that is available to you, but not the public. The personal information we collect about you is private. Minnesota Statutes 13.04 and 13.43 are two sections that govern what affects you as an applicant from employment with the City of Annandale. All data collected is considered private except for the following:

- (1) Your veteran's status.
- (2) Relevant test scores.
- (3) Your rank on our eligibility list.
- (4) Your job history.
- (5) Your education and training.
- (6) Your work availability.

Your name is considered private information; however, if you are selected to be interviewed as a finalist, your name becomes public information.

The data supplied by you may be used for such other purposes as may be determined to be necessary in the administration of personnel policies, rules, and regulations of the City of Annandale. Furnishing social security numbers, date of birth (unless a minimum age is required), sex, age group, and disability data is voluntary, but refusal to supply other requested information will mean that your application for employment may not be considered.

Private data is available only to you, appropriate City employees, and others as provided by state and federal law who have a bona fide need for the data. Public data is available to anyone requesting it and consists of all data furnished in the application for employment that is not designated in this notice as private data.

Except for race, sex, age, and disability data, the information you give us about yourself is needed to identify you and to assist the Annandale City Administrator's Office in determining your suitability for the position for which you are applying. Race, sex, age, and disability data are used in summary form by the City of Annandale to monitor protected class employment and to meet federal, state, and local reporting requirements.

I declare that I have read and understand the information given above regarding the Minnesota Data Practices Act.

Applicant's Printed Name:	
Applicant's Signature:	Date

#### VETERANS PREFERENCE POINTS APPLICATION INSTRUCTIONS

Preference points are awarded to veterans and spouses of deceased or disabled veterans to add to their exam results for employment positions subject to veterans preference. Points are awarded subject to the provisions of Minnesota Statutes Section 43A.11. To be eligible for veterans preference points, you must:

- 1. Be 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 service on active duty, and be a citizen of the United States or resident alien, or be the surviving spouse of a deceased veteran (as defined above) or the spouse of a disabled veteran who because of the disability is not able to qualify: AND
- 2. NOT be currently receiving or eligible to receive a monthly veteran's pension based exclusively on length of military service.

The information you provide on this form will be used to determine your eligibility for veterans preference points. You are not required to supply this information, but we cannot award veterans points without it

YOU MUST SUPPLY A COPY OF YOUR DD214. DISABLED VETERANS MUST ALSO SUPPLY FORM FL-802 OR AN EQUIVALENT LETTER FROM A SERVICE RETIREMENT BOARD. SPOUSES APPLYING FOR PREFERENCE POINTS MUST SUPPLY THEIR MARRIAGE CERTIFICATE, THE VETERAN'S DD214 AND FL-802 OR DEATH CERTIFICATE.

If you supply the supporting documentation by separate mail, your name and the position applied for must be included.

V	ETERANS PREFERENC	CE POINTS APPL	ICATION
Veteran		If spouse, veterar	n's name:
Self	Spouse		
Branch of Service:	•	Period of active of	duty
		from:	to:
Rank of Discharge:	Type of Discharge:	Date of Final	Service No:
J		Discharge:	
Preference requested:			
Veteran	(10 pts)	Disab	oled Veteran (15 pts)
	Deceased Veteran (10 pt		se of Disabled Veteran (15 pts)
instructions above). It	f the documentation is not	t attached, it must b	upporting documentation (see be received in our office no antee that points are awarded
is true and correct. I a			the information given on this documation by the Veteran's Administrat
			FOR OFFICE USE ONLY
Signature	Da	ite	10 Points
			15 Points

## **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 Annandale appreciates your cooperation in our efforts to ensure affirmative action and equal opportunity.

Please indicate the position(s) for which you are applying:		
Please indicate how you heard about this position:		
Please place a check in the appropriate blanks:		
Gender: MaleFemale		
With which racial/ethnic group do you identify?		
Asian or Pacific Islander		
African American (Black)		
Hispanic		
Native American or Alaskan Eskimo		
Caucasian (White)		
Other (Please indicate:		
Disability status, defined as:		
<ul> <li>(1) Has physical, sensory or mental impairment (condition) which materially (significantly) limits one or more life activities;</li> <li>(2) Has a record of such an impairment (condition);</li> <li>(3) Is regarded as having such an impairment (condition).</li> </ul>		
Based on the above information, do you claim disability status?  Yes No		

## **BACKGROUND INVESTIGATION CONSENT**

Signature			 Date					
Date of birth	Social security #	Driver's license #	State of license					
City/State Zip								
Former street	address		How long?					
City/State Zip								
Present stree	t address		How long?					
	Maide	en name or other names	used					
		Full name (printed)						
regards to the	information obtained is my true and comp	d from any and all of the lete legal name, and all i	liabilities, claims, or lawsuits in above referenced sources used. nformation is true and correct to					
			erson or entity, which provides					
(past/present	- employer/organiza	ition).						
those maintai purpose of co information, w	eferences, character, past employment, education, criminal, or police records, including nose maintained by both public and private organizations and all public records for the surpose of confirming the information contained on my Application and/or obtaining other offormation, which may be material to my qualifications as a volunteer or for employment low, and if applicable, during the tenure of my volunteering or employment with the							
	<u> </u>	ike an independent inves	tigation of my background,					

# CITY OF ANNANDALE ADDENDUM TO EMPLOYMENT APPLICATION

#### **POLICE OFFICER**

App	licant Name:
1.	Do you have a valid Minnesota Driver's License:YesNo
2.	Do you have a P.O.S.T. Police Officer License:YesNo
3.	Are you available to work shifts from 5:00 pm. – 3:00 a.m.: Yes No
3.	Do you have additional post-secondary education? How many years?
4.	Describe your experience in law enforcement, if any. How many years? What did you do?
5.	Describe your experience in law enforcement or other positions requiring you to work with the public. How many years have you held positions working with the public? What did you do?
6.	Describe your experience with computers. How many years? What hardware/software have you used?
7.	Describe your experience in working with firearms. How many years? What did you do?

BE SPECIFIC. Failure to detail specific experience and number of years may result in failure to accurately score your application and may reduce your chances for an interview.