

CITY OF ANNANDALE EMPLOYMENT APPLICATION

(PLEASE BE SURE HANDWRITING IS CLEARLY LEGIBLE)

Last name		First Name	Middle Name
Address		City	State Zip Code
Home Telephone () —	Mobile Telephone () —	Email Address <u>Please</u>	

Position Applied For	Date Application is Submitted
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Please tell us how you learned about this position, as it will help us more effectively advertise for our next hiring.

- ☐ Annandale Advocate ☐ LMC Website ☐ Posting Please tell us where: _____
- ☐ Friend, Relative ☐ Newspaper article ☐ Other _____

How best may we contact you: home only, work is okay, times, numbers, etc. _____

Are you currently employed? ☐ Yes ☐ No

If yes, how much notice would you give upon separation. _____

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? ☐ Yes ☐ No
Proof of citizenship or immigration status will be required upon employment.

Are you currently on “lay off” status and subject to recall? ☐ Yes ☐ No

Do you have a High School diploma? ☐ Yes ☐ No

Do you have a bachelor’s degree? ☐ Yes, what degree(s)? _____ ☐ No

Have you ever been fired, or forced to resign from a position? If so, explain on a separate sheet. . . . ☐ Yes ☐ No

Do you have a valid driving license? (Note the state if **not** issued by the State of Minnesota) ☐ Yes ☐ No

Note to Applicants: A copy of the *Position Description* for which you are applying should accompany this application. If it does, answer the following question only after reviewing that job description. If it does not, please contact City Hall before completing this Application.

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 *Position Description*?

_____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				

REFERENCES

Please provide a minimum of three professional references. These should exclude family members and friends, and ought to be individuals that can speak specifically to your abilities and character as a professional. You may provide your list of references on a separate sheet if you prefer. Be advised that the City will likely contact references for those candidates chosen for interviews as soon as they are chosen.

1 _____ (Name)	(_____) _____ Daytime Phone
_____	(_____) _____ Evening Phone
2 _____ (Name)	(_____) _____ Daytime Phone
_____	(_____) _____ Evening Phone
3 _____ (Name)	(_____) _____ Daytime Phone
_____	(_____) _____ Evening Phone

[illegible]

EMPLOYMENT EXPERIENCE

List your most recent 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		Work Performed
		From Month/Year	To Month/Year	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving (or wanting to leave)		<u>Hours/Week</u>	<u>Hours/Week</u>	
2. Prior Employer		Dates Employed		Work Performed
		From Month/Year	To Month/Year	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving		<u>Hours/Week</u>	<u>Hours/Week</u>	
3. Prior Employer		Dates Employed		Work Performed
		From Month/Year	To Month/Year	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving		<u>Hours/Week</u>	<u>Hours/Week</u>	

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 not 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

CITY OF ANNANDALE
ADDENDUM TO EMPLOYMENT APPLICATION
SEASONAL MAINTENANCE WORKER

Applicant Name: _____

1. Do you have a High School Diploma or GED: _____ Yes _____ No
2. Do you have a MN Driver's License: _____ Yes _____ No
3. Describe your experience in park maintenance/landscaping, if any. How many years? What did you do? _____

4. Describe your experience in building/grounds maintenance, if any. How many years? What did you do? _____

5. Describe your experience in street maintenance, if any. 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.

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 serving 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.

VETERANS PREFERENCE POINTS APPLICATION			
Veteran _____ _____ Self _____ Spouse	If spouse, veteran's name:		
Branch of Service:	Period of active duty from: _____ to: _____		
Rank of Discharge:	Type of Discharge:	Date of Final Discharge:	Service No:
Preference requested: _____ Veteran _____ Disabled Veteran _____ Spouse of Disabled Veteran _____ Spouse of Deceased Veteran			

Your Preference Points application cannot be considered without supporting documentation (see instructions above). If the documentation is not attached, it must be received in our office no later than the application deadline for the position in order to guarantee that points are awarded in a timely manner.

I hereby claim veterans preference for this position and swear that the information given on this document is true and correct. I also authorize the release of necessary information by the Veteran's Administration to the Annandale City Administrator's Office.

FOR OFFICE USE ONLY

_____ 15 Points

Signature _____

Date _____

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: _____ Male _____ Female

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:

- (1) Has physical, sensory or mental impairment (condition) which materially (significantly) limits one or more life activities;
- (2) Has a record of such an impairment (condition);
- (3) Is regarded as having such an impairment (condition).

Based on the above information, do you claim disability status?

_____ Yes _____ No



BACKGROUND INVESTIGATION CONSENT

Title/Position applied for: _____

I, _____ (applicant name), hereby authorize the City of Annandale and/or its agents to make an independent investigation of my background, references, character, past employment, education, criminal, driving or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my application and/or obtaining other information, which may be material to my qualifications as a volunteer or for employment now, if applicable, during the tenure of my volunteering or employment.

I release the City of Annandale and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims, or lawsuits in regard to the information obtained from any and all of the above referenced sources used. The following is my true and complete legal name, and all information is true and correct to the best of my knowledge.

FULL NAME (PRINT) _____

MAIDEN NAME OR OTHER NAMES USED _____

PRESENT STREET ADDRESS _____

CITY, STATE, ZIP _____

HOW LONG HAVE YOU LIVED AT THE ABOVE ADDRESS? _____

FORMER STREET ADDRESS _____

CITY, STATE, ZIP _____

HOW LONG DID YOU LIVE AT THIS FORMER ADDRESS? _____

DATE OF BIRTH _____ SOCIAL SECURITY # _____

DRIVERS LICENSE # _____ STATE OF LICENSE _____

SIGNATURE

DATE