

We welcome you as an applicant for employment with the City of Minnetrista. It is the City of Minnetrista's policy to provide equal opportunity in employment. The City of Minnetrista will not discriminate on the basis of race (including traits associated with race, including, but not limited to, hair texture and hair styles such as braids, locs and twists) 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.

The city of Minnetrista 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 Allie Polsfuss at 952-241-2510.

Please print or complete application in a legible manner. Complete ALL sections of the application.

Position Applied For:			
Name: (Last)	(First)	(MI)	
Street Address			
Street Address			
City	State	Zip	
Dhana Niwahan		Altamata Diagram	
Phone Number		Alternate Phone	
Email		_	
Are you legally eligible to work in the	ne United States in the	position for which	☐ Yes ☐ No
you are applying?		•	— 1C3 140
Are you at least 18 years old?			□ Yes □ No
May we contact your present er	nployer?		□ Yes □ No
Have you ever applied for a position with City of Minnetrista before? If yes, what position and date of application			☐ Yes ☐ No
Desired salary for the position app			

Desition Applied For

Educational Information

	High School		Undergraduate College/University			Graduate/ Professional						
School Name & Location												
Years Completed	9	10	11	12	1	2	3	4	1	2	3	4
Diploma/Degree earned												
Major/Course of Study												
Describe any specialized training, apprenticeships, skills and extracurricular activities												
Describe any honors you have received												
State any additional information you feel may be helpful to us in considering your application												

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

List any current licenses, registrations, or certificates you possess which may be related to this position:

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Employment Experience

List present or most recent employer first. Please note "see resume" is <u>not</u> an acceptable response for any entries on this application. Resumes will only be considered in addition to, but not in lieu of, this application.

Employer	Name of	last supervisor	Hrs./Week
Address	Start Dat	e	
City, State, Zip	End Date	3	
Phone Number	Last job	iitle	
Reason for leaving (be specific):			
Describe your work in this job:			
May we contact this employer?	Yes No)	
Employer	Name	of last supervisor	Hrs./Week
Address	Start D	Pate	
City, State, Zip	End Da	ate	
Phone Number	Last jo	b title	
Reason for leaving (be specific):			
Describe your work in this job:			
May we contact this employer?	Yes No)	

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

Unpaid Experience

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 Minnetrista 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 Minnetrista "at will," and that employment may be terminated by either the City of Minnetrista or me at any time, with or without notice.
With my signature below, I am providing the city of Minnetrista 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 have read the included Applicant Data Practices Advisory, and I further understand that criminal history checks may be conducted (after I have been selected for an interview, in the

Signature Date

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 Minnetrista in writing of any changes to information reported in this application for

employment.

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 "VETERAN'S DD214 COPY 2, 4 or 6), OR OTHER DOCUMENTATION VERIFYING MILITARY SERVICE. DOCUMENTATION MUST BE RECEIVED BY 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 DD214 (Copy 2, 4, or 6) or other documentation verifying military 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 DD214, or other documentation verifying military service, contact your County Veterans' Service Office.

The city of Minnetrista operates under a point preference system, which awards points to qualified veterans to supplement their application. After receiving a passing score, 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, 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 once when applying for the first promotion after securing public employment.

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 DD214 Copy 2, 4 or 6), or other documentation verifying military 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)	Phone Number	Are you a US Citizen or Resident Alien? YES NO		
VETERAN (10 points): (DD214 or DD215, Copy 2, 4, or 6,or other doct submitted to receive points) Honorably discharged □Yes□ No	umentation verifying ı	military service, must be		
DISABLED VETERAN (15 points): (DD214, Copy 2, 4 or 6, or other documentation of Benefits Letter showing a compensable servi 10% or more must be submitted to receive point Percent of Disability:	ce connected disabili			
SPOUSE OF DECEASED VETERAN (10 point death): (Veteran's DD214 or DD215, or other documen marriage certificate, spouse's death certificate at to receive points. You are ineligible to receive p from the veteran). Date of Death:	tation verifying militar and proof veteran is d	ry service, photocopy of leceased must be submitted arried or were divorced		
SPOUSE OF DISABLED VETERAN (15 points (Veteran's DD214 or DD215, Copy 2, 4, or 6, or photocopy of marriage certificate, and USD VA connected disability rating decision, usually of 1 disability, must be submitted to receive points.	r other documentation Rating Decision show	wing a compensable service		
How does veteran's disability prevent performative veteran's service-connected disability the veteral (be specific):	-	•		
<u>AFFIDAVIT</u> : 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 Minnetrista by the required application deadline.				
Signature	Date			

Information Regarding Claiming Veterans' Preference

Preference points are awarded to qualified veterans as defined by Minn. Stat. § 197.447, 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;
- 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 disability incurred while serving on active duty, or
 - iii. have completed the minimum active duty requirement of federal law, as defined by Code of Federal Regulations title 38, section 3.12a, i.e., having fulfilled the full period for which a person was called or ordered to active duty under Title 10 of the United States Codet, 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 your DD214 or DD215, Copy 2, 4, or 6, or other documentation verifying military service. This copy must state the character 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 or Summary of Benefits Letter that supports/verifies the fact that the veteran has a compensable Service connected disability.
- 3) A spouse of a deceased veteran, applying for preference points must supply their marriage certificate, the veteran's DD214 or DD215 Copy 2, 4, or 6, or other documentation verifying military service, a death certificate, verification of their marriage at the time of veteran's death, and that the spouse has not remarried.

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 Minnetrista 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					
\square American Indian or Alaskan Native through Tribunal 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					

Applicant Data Practices Advisory

According to Minn. Stat. § 13.04, the city must advise you of the following. Purpose and intended use of the data:

The city collects this information for purposes of selecting a candidate for hire. For public safety positions or in the event you are selected for hire, your data will be used to perform a criminal background check, including using the BCA's website. Consultant, city staff and elected officials involved in the hiring process will have access to the data provided. Data may be shared upon court order or provided to the state or legislative auditor, upon request.

Whether you may refuse or are legally required to supply this data: Application for employment as well as supplying any data in application for employment is voluntary.

Consequences arising from supplying or refusing to supply this data: We take pride in hiring the best candidates, but we can't do this without a complete application. Filling out the application is voluntary, and the more complete the application, the better your chances of conveying to the city you are the best candidate for the job. Except for explicitly optional requested information, refusal to provide a complete application may result in immediate disqualification from consideration for a position.

Minors submitting this application have the right to request that parental access to private data be denied. If you wish to make this request, please submit the request in writing to Allie Polsfuss.