



CITY OF CROSSLAKE
37028 County Road 66
Crosslake MN 56442-9301
218-692-2688

DATE: _____

EMPLOYMENT APPLICATION

Title of job applied for: _____
(Type or print)

Last Name	First Name	MI	Home Phone	Work Phone
Street Address	Apt. No.	City	State	Zip

If you should move after applying for this position, please notify the City in writing immediately of your change of address and phone number.

- * Are you 16 years of age or older? _____ Yes _____ No
- * Are you legally eligible for employment in the U.S.? _____ Yes _____ No
- * Do you have a valid Minnesota driver's license? _____ Yes _____ No Class Type: _____
- * Have you ever been convicted of a felony? (Conviction will not necessarily disqualify you for employment. However, conviction of a crime related to this position may result in your being rejected for this position.) _____ Yes _____ No If yes, explain: _____

- * How did you hear about the position? _____
- * Has any of your education or experience been under another name? _____ Yes _____ No
If yes, list other name: _____

OTHER APPLICANT INFORMATION

AN EQUAL OPPORTUNITY EMPLOYER, the City of Crosslake will hire and promote without regard to such non-job related distinctions as race, creed, color, age, religion, sex, marital status, status with regard to public assistance, national origin, physical or mental disability or sexual orientation.

DATA PRIVACY: The information on this application is necessary to identify you and to determine your suitability for this position. You must supply this information in order to be considered for employment. Background investigations may be conducted on the top candidates if needed to determine suitability for the position. If a background check is required, you will be notified and asked to sign a release.

EMPLOYMENT EXPERIENCE

List your work history for the last eight years. Start with your PRESENT or MOST RECENT position. Additional experience may be listed beyond five years. If included, do not list dates. Give length of employment only.

Employer	Telephone ()	<u>Dates Employed</u>		Work Performed
		From	To	
Address				
Job Title		<u>Hourly Rate/Salary</u>		
		Starting	Final	
Supervisor				
Reason for Leaving				

Employer	Telephone ()	<u>Dates Employed</u>		Work Performed
		From	To	
Address				
Job Title		<u>Hourly Rate/Salary</u>		
		Starting	Final	
Supervisor				
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		From	To	
Address				
Job Title		<u>Hourly Rate/Salary</u>		
		Starting	Final	
Supervisor				
Reason for Leaving				

If you need additional space, please continue on a separate sheet of paper.

If you are currently working, may we contact your PRESENT employer about your work?
 _____ Yes _____ No

MEMBERSHIP IN CIVIC AND PROFESSIONAL ORGANIZATIONS

Please describe:

Special Skills and Qualifications

Summarize special skills and qualifications acquired from employment or other experience:

*If you need more space, use the last page of the application or attach additional sheets. Although you must fully complete this application, you may **also include a job resume** or other description of your work and volunteer and personal experiences that are relevant to this position. If a questionnaire is included as an application supplement for the position, it must be completed for you to be considered.*

EDUCATION

	Elementary	High	College/University	Graduate/ Professional
School Name				
Years Completed: (Circle)	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe Course of Study:				
Describe Specialized Training, Apprenticeship, Skills & Extra-Curricular Activities				

Honors received (school and community):

State any additional information you feel may be helpful to us in considering your application.

Give name, address and telephone number of three (3) references who are not related to you.

List any correspondence courses, special courses, seminars, workshops, training and skills acquired that might relate to this position. Please review the job description before answering this question.

List any current licenses, registrations or certificates that you possess. Include driver's license number, class and State of Issue.

TO BE COMPLETED BY APPLICANTS FOR CLERICAL, ADMINISTRATIVE AND FISCAL POSITIONS ONLY

Business machines and experiences: _____

DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner the activities involved in the job or occupation for which you have applied? _____NO _____YES

YOUR RIGHTS AS A SUBJECT OF DATA

Minnesota Statutes 13.01 through 13.87 (1983) on data privacy require that you be informed that the following information which you are asked to provide in the employment application process is considered private data: Name, Home Address and Home Phone Number.

This means it is available only to you, the City of Crosslake officials and their representatives who have a bona fide need for it. This data will be used to identify you within the hiring process. Refusal to supply requested information may mean your application will not be considered.

Your name is considered private until you become a finalist for employment with the City of Crosslake. You are considered a finalist when and if you are selected to come to the final selection interview prior to selection.

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 Crosslake 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 Crosslake data classified as private. The data which I authorize to be released consists of private data as defined by M.S. 13.02, Subd. 12 and has been or will be collected by the City of Crosslake 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 Crosslake to have access to this information is to determine my suitability for employment for the position for which I have applied. I release all parties from any and all liability and claims for damage whatsoever that may result therefrom.

5. I have read and understand the Job Description given to me by the City of Crosslake for the position covered by this application and feel that I am fully qualified with the knowledge, skills, and ability to perform the duties required.

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 Crosslake. 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: _____