



**APPLICATION FOR
EMPLOYMENT
CITY OF GOODVIEW**
 4140 5th Street
 Goodview, MN 55987
 (507) 452-1630
 Fax (507) 452-2174

DATE RECEIVED

OFFICE USE ONLY

Position For Which You Are Applying

Date of Application

Date Available For Work

PERSONAL INFORMATION

Last Name

First Name

Middle Name

Street Address

Residence Phone

()

City

State

Zip Code

Business Phone

()

Are you 18 years of age or over?

Yes No If no, state Date of Birth _____

County of Residence

Have you previously been employed by the city?

Yes No If yes, date _____ Position(s) _____

Driver's License Number

State

Class

EDUCATION

Did you graduate from high school or receive a GED? Yes No

School Attended: _____

How many years of education have you completed (circle one) 12 13 14 15 16 17 18 19 20

Names & Location of College, University, Technical School	Dates		Did you Graduate?	Certificate or Degree	Course of Study
	From	To			
			Yes <input type="checkbox"/> No <input type="checkbox"/>		
			Yes <input type="checkbox"/> No <input type="checkbox"/>		
			Yes <input type="checkbox"/> No <input type="checkbox"/>		
			Yes <input type="checkbox"/> No <input type="checkbox"/>		
			Yes <input type="checkbox"/> No <input type="checkbox"/>		

EMPLOYMENT HISTORY

Please give accurate, complete and part-time employment record.
Start with present or most recent employer first.
Attach additional sheets if necessary.

Company Name _____

Address _____

Phone _____

Number _____ Supervisor: _____

Your title _____ Supervisor's Title _____

Number and Type of Positions You Supervised _____

Principal Responsibilities

Length of Employment

From _____

Month Year

To _____

Month Year

Total _____

Years Months

Hours Per Week _____

Last Salary _____

Reason For Leaving _____

May we contact your present employer? Yes No

If no, please explain?

Company Name _____

Address _____

Phone _____

Number _____ Supervisor: _____

Your title _____ Supervisor's Title _____

Number and Type of Positions You Supervised _____

Principal Responsibilities

Length of Employment

From _____

Month Year

To _____

Month Year

Total _____

Years Months

Hours Per Week _____

Last Salary _____

Reason For Leaving _____

May we contact your present employer? Yes No

If no, please explain?

Company Name _____

Address _____

Phone _____

Number _____ Supervisor: _____

Your title _____ Supervisor's Title _____

Number and Type of Positions You Supervised _____

Principal Responsibilities

Length of Employment

From _____

Month Year

To _____

Month Year

Total _____

Years Months

Hours Per Week _____

Last Salary _____

Reason For Leaving _____

May we contact your present employer? Yes No

If no, please explain?

EMPLOYMENT HISTORY

The City of Goodview will not discriminate against or harass any employee or applicant for employment because of race, color, creed, national origin, sex, disability, age, marital status, or status with regard to public assistance.

Company Name _____

Address _____

Phone Number _____ Supervisor: _____

Your title _____ Supervisor's Title _____

Number and Type of Positions You Supervised _____

Principal Responsibilities

Length of Employment

From _____
Month Year

To _____
Month Year

Total _____
Years Months

Hours Per Week _____

Last Salary _____

Reason For Leaving _____

May we contact your present employer? Yes No

If no, please explain?

Company Name _____

Address _____

Phone Number _____ Supervisor: _____

Your title _____ Supervisor's Title _____

Number and Type of Positions You Supervised _____

Principal Responsibilities

Length of Employment

From _____
Month Year

To _____
Month Year

Total _____
Years Months

Hours Per Week _____

Last Salary _____

Reason For Leaving _____

May we contact your present employer? Yes No

If no, please explain?

Relevant current professional memberships, registrations, or licenses, include date first issued.

Job Relevant Volunteer and Unpaid Work Experience

Kind of Volunteer Activity (Do not specify organization)	Major Responsibilities	Number of Hours Per Month	Years	
			From	To

Describe any additional experience or training that qualifies you for this job.

Word Processing Yes No If yes, number of years _____ Typing Speed _____ wpm

Computer Experience Yes No Specify _____

In accordance with the Immigration Reform and Control Act of 1986, the City of Goodview hires only U.S. Citizens and lawfully authorized alien workers. If hired, you will be **required** to provide written documentation of citizenship or legalized alien program. Failure to provide said documentation would result in dismissal.

Minn. Stat. Sec. 518.611, Subd. 8, requires employers to obtain information from all new employees regarding court-ordered child support obligations that are **required** by law to be withheld from income. Failure to provide said documentation would result in dismissal.

Have you served a sentence in jail or prison or been convicted of a misdemeanor or felony for which a jail sentence could have been imposed? You may answer "No" if the conviction or criminal records have been annulled, sealed, set aside, or purged, or if you have been pardoned pursuant to the law. Yes No If "Yes", please attach a separate sheet with explanation. Information concerning this question will not be used to automatically bar you from employment but may be used to direct your interest to areas less related to the areas of your conviction.

If you are hired for this position you may be required to undergo a physical examination at the City's expense to determine whether or not you are able to perform the duties of this position in an effective and safe manner, and whether or not accommodations need to be made for you.

The City of Goodview does not discriminate on the basis of handicapped status in the admission or access to, or treatment or employment in, its programs or activities. It is the policy of the City of Goodview to provide reasonable accommodations to the known physical and mental limitations of qualified handicapped applicants and employees in order for them to perform the essential functions of the job in question.

Did you serve in the military service of this country and separate under honorable conditions from any branch of the armed forces of the U.S. after have served on active duty for 181 consecutive days or by reason of disability incurred while serving on active duty? Yes No If yes, indicate dates of military service from _____ to _____. If "Yes", are you a permanent resident of the State of Minnesota Yes No Describe your duties and any special training. _____

Name three people who are not relatives who can be contacted regarding your qualifications, work habits and character.

NAME	PRESENT ADDRESS	TELEPHONE	POSITION & RELATIONSHIP TO YOUR WORK

SIGNATURE

The City of Goodview has the right to verify information provided in the application. False information may subject an applicant to the penalty provisions of M.S. 43A.39.

In connection with this application for employment, I authorize the City of Goodview and any agent acting on its behalf to conduct an inquiry into any job-related information contained in this application, including, but not limited to, my records maintained by an educational institution relating to academic performance such as transcripts. Moreover, I hereby release the City of Goodview and any agent acting on its behalf from any and all liability of whatsoever nature by reason of requesting such information from any person.

Yes Yes, but not present employer until job is offered. No (We may be unable to hire you without this information.)

I declare that any statement in this application or information provided is true and complete and hereby acknowledge that I have read and understand the information below.

Date _____ Signature (Do Not Print) _____

IMPORTANT FACTS ABOUT INFORMATION ON YOUR APPLICATION

This application is to assist in the process of referring you for possible employment. Certain information requested on the application is private; that is, it may be released only to you or to agencies where you may be considered for employment (to comply with M.S. 15.165, Subd. 2). If you are employed, the data will be available to the Department of Finance, the Internal Revenue Service, and the Social Security Administration for payroll and tax purposes. If you disagree with the data we have about you, notify the City of Goodview office by letter.

Private Data	Why We Ask For It	Are You Legally Obligated To Provide It?	What May Happen If You Don't Provide It?
Name (The names of finalists for a position is public information.)	To distinguish you from all other applicants	Yes	Failure to provide information may be cause for rejecting an applicant.
Street Address (City and county of residence are public information.)	To be able to send you notices	Yes	Failure to provide information may be cause for rejecting an application.
Driver's License	May be required to drive city vehicles	No	Failure to provide information may be cause for rejecting an application.
Home Telephone	To be able to contact you to determine availability for interview.	No	We may not be able to employ you in certain jobs where you may be required to come to work on short notice.
Sex, Racial/Ethnic Group, Handicapped Status, Vietnam Veteran Status	To be able to make Equal Opportunity reports as required by law.	No	We will not be able to determine whether our selection processes result in unfair discrimination, or to take affirmative action in our hiring.
Conviction Record	To determine whether we may legally accept an application from you and to determine whether your record may be a job-related consideration.	Yes	We will not be able to make determinations required by law.

ALL OTHER INFORMATION ON THE APPLICATION IS PUBLIC, THAT IS, IT MAY BE GIVEN TO ANYONE FOR ANY PURPOSE.