

Application for Employment

Phone: 763-753-2630

Fax: 763-753-9881

I. Position Desired		Date:	
Title of position for which you	are applying:		
	yment:		
II. Personal Data			
Name:			
First	Middle	Last	
Street	Alternate Phone:	State Best time to call:	
	ments required to prove your el		
☐ Yes □		J ,	
Minnesota P.O.S.T. #:	(If applicable)	
Have you previously worked for	or the City of St. Francis?	☐ Yes ☐ No	
If yes, position held/depa	artment:		
Date of Hire:Date of Resignation:			
List all other names under which you have been employed or educational records may be found:			
Do you have any special need	s which may necessitate accomi	modations in the application/in	terview
process? Yes		nodations in the application, in	itel view
If Yes, please describe the type of accommodation requested:			
Have you had any violations on your driving record within the past (5) years? \Box Yes \Box No			
If yes, please explain:			
III. Personal Statement			
		o feet o soo he soo t	
Please indicate why you are interested in the position and what you hope to accomplish if selected:			

IV. Work/Volunteer Experience

List most recent work and volunteer experience first. Please attach additional relevant work experience history sheets if necessary.

Employer Name:	
Employer Address:	
Name of Supervisor:	Phone:
Job Title:	
Job Duties:	
Dates of Employment/Experience: Start:End:_	
Starting Salary:Ending Salary:	
Reason for Leaving:	
May we contact your previous supervisor for a reference?	☐ Yes ☐ No
Employer Name	
Employer Name:Employer Address:	
Name of Supervisor:	
Job Title: Job Duties:	
Dates of Employment/Experience: Start:End:_	
Starting Salary:Ending Salary:	
Reason for Leaving:	
May we contact your previous supervisor for a reference?	☐ Yes ☐ No
Employer Name:	
Employer Address:	
Name of Supervisor:	
Job Title:	
Job Duties:	
Dates of Employment/Experience: Start:End:_	
Starting Salary:Ending Salary:	
Reason for Leaving:	
May we contact your previous supervisor for a reference?	☐ Yes ☐ No

V. Education

List all schools attended. Please attach additional education sheet if necessary.

High School				
Name of High School:	:			
Address of School: _				
Diploma or GED Rece	ived:		Graduation	Date:
			Grade	Point Average:
Higher Education				
Name of School:				
Address of School:				
				Date:
		Graduation Date: Grade Point Average:		
Name of School:				
Address of School:				
Degree Received:			Graduation	Date:
Major/Minor:				Point Average:
•				<u> </u>
Name of School:				
Address of School: _				
				Date:
Major/Minor:	Grade Point Average:			
VI. Licenses				
List current licenses, I	registrations, or cert	ificates relevant to t	he position for which	you are applying.
<u>Description</u>	License No.	Issued by	<u>Date Issued</u>	<u>Expiration</u>

VII. References

References should be people in a position to discuss your qualifications for the position you seek. Include managers, directors, or heads of departments under whom you have worked. Indicate any who are related to you.

Name of Reference:	Title:	
Address:		
Phone Number:	Relationship to You:	
	Title:	
Address:		
Phone Number:	Relationship to You:	
Name of Reference:	Title:	
Address:		
Phone Number:	Relationship to You:	

VIII. Certification, Acknowledgment and Release

I certify that the answers I have given on this application are true and correct to the best of my knowledge. I understand that any false or misleading information provided, or any omission or concealment of facts, will disqualify me from consideration for employment, and constitutes grounds for my immediate dismissal should I be employed by the City of St. Francis.

I understand, acknowledge and agree that no offer of employment is valid or binding until formal approval by the City Council or the appointing authority referenced in the job description, and that until such approval, the City of St. Francis shall not be liable for any reliance on any oral or written offers of employment made to me.

In connection with this application, I hereby authorize any and all current and former employers, organizations where I have volunteered ("volunteer organizations") and references named in this application, or any agent of such a current or former employer or volunteer organization, to release to the City of St. Francis and its agents any and all information regarding my job performance and fitness/qualifications to perform the position I am presently seeking and any other employment or related information, both public and private, in their possession.

I hereby release the City of St. Francis and all current and former employers, volunteer organizations and references listed herein and any and all agents acting on behalf of the City of St. Francis, former employers, volunteer organizations or references, from any and all liability of whatever nature by reason of requesting or providing such information.

- Notice to Applicant: If you do not agree with any portion of the acknowledgement, certification, authorization and release, cross out that section and initial it.
- Applications must be signed to be considered for employment. Complete all applicable areas. Do
 not mark your application "see resume". An incomplete application may reduce your opportunity
 for employment with the City of St. Francis. Applications must be received by the application
 deadline.

Date:	Signature:

IX. Data Privacy Notice

According to Minn. Stat. § 13.04, the City must advise you of the following.

1. 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.

2. 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.

3. 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.

X. Veteran's Preference Points Application

Preference points are awarded to qualified veterans and spouses of deceased or disabled veterans to add to their exam results. Points are awarded subject to the provisions of Minnesota Statutes § 43A.11. To be eligible for veteran's preference points you must:

- 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 a 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 veteran's preference points. You are not required to supply this information, but we cannot award veteran's points without it.

If you suppl must be incl	y the supporting documentation by separate mail, your name and the position applying for uded.
, , , ,	lying for veteran's preference points $\ \square$ Yes $\ \square$ No answered "yes", your DD214 or other documentation must be submitted with application.
Preference:	☐ Veteran (10 pts) ☐ Disabled Veteran (15 pts)

Spouse of Disabled Veteran (10 pts)

Branch of Service:	Active Duty Fror	n:	To:
Rank of Discharge:	Type of	f Discharge:	
Date of Final Discharge:	Service N	umber:	
Are you receiving or eligible for a military p	ension? Yes	□ No	
Do you have a compensable service rated of	disability? Yes	\square No	
If you answered 'yes", your USDVA Letter of	of Disability must be su	ıbmitted with a	application.
Your preference points application canninstructions above). If the documentation is seven (7) calendar days after the application awarded in a timely manner.	is not attached, it mus	t be received	in our office no later than
How were you made aware of this employ			
Internet (specify site)			
Newspaper			
Employment Agency (list name)			
Employee Referral (Employee name)			
Community Agency			
Walk-In			
Other			

Continued >>>>>>

Police Officer Recruitment Supplemental Questionnaire CITY OF ST. FRANCIS

Please complete the following information and turn in with your application.

We welcome your interest in advancing your career with the City of St. Francis. Please furnish us with as complete information as possible so that we may give you full consideration. In addition to this questionnaire, you may attach further information, which you believe qualifies you for the position of Police Officer.

It is our policy to provide equal employment opportunities to all. The City of St. Francis does not discriminate on the basis of race, color, creed, religion, national origin, gender, sexual orientation, disability, age, marital status, or status with regard to public assistance. Applicants will be evaluated and selected on the basis of merit.

First Name	First Name Last Name		MI			
***	***MINIMUM SELECTION STANDARDS (PER MINNESOTA RULES 6700.0700)***					
Are you	a citizen of the United States?	Yes _	No			
Do you p	ossess a valid driver's license from Minnesota or a contiguous state?	Yes _	No			
Have yo	a ever been convicted of any of the following offenses:	Yes _	No			
H	n offense in any other state or federal jurisdiction which would have been a fercommitted in Minnesota ISS 609.224 (assault in the 5 th degree) ISS 609.2242 (domestic assault) ISS 609.231 (mistreatment of residents or patients) ISS 609.2325 (abuse of vulnerable adult) ISS 609.2335 (financial exploitation of a vulnerable adult) ISS 609.234 (failure to report maltreatment of a vulnerable adult) ISS 609.324 (prostitution related prohibited acts) ISS 609.465 (presenting false claims) ISS 609.466 (medical assistance fraud) ISS 609.72, subdivision 3 (disorderly conduct in re a vulnerable adult) ny state or federal narcotics or controlled substance law ny or the crimes listed in another state or federal jurisdiction, or under a local rould be a conviction if committed in Minnesota		hat			
eligible f	have a MN POST Board Peace Officer License or will you be for a MN POST Board Peace Officer License by the closing me application process?	Yes _	No			

************************* A copy of your Peace Officer License or a copy of the letter from the MN POST Board Confirming your eligibility MUST be submitted have been submitted with your application. ********************* ***POSSIBLE REJECTION CRITERIA*** Have you ever been convicted of a gross misdemeanor offense in the past 3 years? Yes No Explain – Once in the last 3 years or twice ever, have you been convicted of DUI, DWI, BAC over .08, or Implied Consent Test Refusal? Yes No Have you ever been dismissed from employment or resigned in lieu of termination within the last 3 years? Yes No Explain-Are you registered as a predatory offender? Yes No ***BACKGROUND ISSUES*** In the last 3 years, have you ever been convicted of a misdemeanor offense (Including traffic and driver's license convictions)? ___ Yes _ No _____ Have you ever been dismissed from a police agency or resigned in lieu of termination? Yes No Explain: In the last 2 years, have you had any "At Fault" motor vehicle ___ Yes ___ No accidents? Explain:

Do you have experience with shift work? Explain: Have you been involved in the Police, Criminal Justice or Public Safety Field	/es]
Are you able to work night, weekends and/or holidays? Do you have experience with shift work? Explain: Have you been involved in the Police, Criminal Justice or Public Safety Field either as an employee or as a volunteer? Mark all that apply: Intern Explorer Explorer Reserve Police Officer or Deputy Sheriff Community or Public Service Officer	
Are you able to work night, weekends and/or holidays? Do you have experience with shift work? Explain: Have you been involved in the Police, Criminal Justice or Public Safety Field either as an employee or as a volunteer? Mark all that apply: Intern Explorer Explorer Reserve Police Officer or Deputy Sheriff Community or Public Service Officer	
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Do you have experience with shift work?Y Explain: Have you been involved in the Police, Criminal Justice or Public Safety Field either as an employee or as a volunteer?Y Mark all that apply:Intern Probation Officer Explorer Dispatcher Reserve Police Officer or Deputy Sheriff Community or Public Service Officer	
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either as an employee or as a volunteer? Mark all that apply: Intern	
either as an employee or as a volunteer? Mark all that apply: Intern	
either as an employee or as a volunteer? Mark all that apply: Intern	
either as an employee or as a volunteer? Mark all that apply: Intern	
either as an employee or as a volunteer? Mark all that apply: Intern	
Mark all that apply: Intern	
Intern	es]
Intern	
Reserve Police Officer or Deputy Sheriff Community or Public Service Officer	
Community or Public Service Officer	
Public Service Officer	
Explain:	
Explain:	
Explain:	
Do you have customer or public service experience?	es]
Explain:	
Do you have experience in conflict resolution?	
Explain:	7 _{ec} 1
	es]
	/es]
	/es]

APPLICATION SUMMARY			
Education	Mark all that apply		
-Associates Degree -Bachelors Degree -Masters Degree			
Training	Mark all that apply		
-Field Training, Firearms, or Use of Force Instructor	_		
-DARE or GREAT Instructor or School Resource Officer	_		
-Standardized Field Sobriety Testing and OPU -Emergency Medical Responder or Emergency Medical Technician	JE		
-Reid Technique of Interview & Interrogation <u>Law Enforcement Related Experience</u>	Mark all that apply		
-Prior Volunteer or Employment with City of St. Francis -Explorer or Intern -Volunteer Reserve Officer -Community (or Public) Service Officer -Correctional or Probation Officer or Dispatch -1 to 3 years as a licensed Police Officer -More than 3 years as a licensed Police Office	<u> </u>		
Other Pertinent Experience -Foreign Language Fluency -Customer Service or Public Contact Experien -Conflict Resolution Experience -No Driving Violations or "At Fault" Acciden	<u></u>		
*Providing false or misleading information or omitting require Application or the Supplemental Questionnaire will result in edition if discovered subsequent to employment. *			
(Signature) Date			