

CITY OF WASECA NOTICE TO APPLICANTS

(Please Read This Important Information)

HOW THE MINNESOTA DATA PRACTICES ACT AFFECTS YOU:

The Minnesota Government Data Practices Act (Minnesota Statutes, Chapter 13) affects you as an applicant for employment with the City of Waseca.

Under the law, the following data is automatically public:

1. Whether you are a veteran;
2. Relevant test scores;
3. Your rank on our eligible list;
4. Your job history;
5. Your education and training; and
6. Your work availability.

Your name is considered private until you become a finalist for employment with the City of Waseca. You become a finalist when and if you are selected to be interviewed prior to selection. If you are hired by the City of Waseca, the following additional information about you will be public:

1. Your name;
2. Your actual gross salary and salary range;
3. Your actual gross pension;
4. The value and nature of your fringe benefits;
5. The basis for the amount of any added remuneration, such as expense or mileage reimbursement, in addition to your salary;
6. Your job title;
7. Your job description;
8. The dates of your first and last employment with us;
9. The status of any complaints or charges against you while employed by the City of Waseca, whether or not they result in disciplinary action;
10. The final outcome of any disciplinary action taken against you as an employee of the City of Waseca, and all the supporting documentation about your case;
11. Your city and county of residence;
12. Your badge number, if any;
13. Your work location and work telephone number;
14. Honors and awards received; and
15. Data which accounts for the individual's work time.

Anything not listed above which is placed in either your application or personnel folder (such as medical information, letters of recommendation, resumes, etc.) is made by this statute private information, and will not be shared with anyone but those members of our staff who must use this to process your application, to file your personnel record, or to conduct normal City business. Also, the Federal Equal Employment Opportunity Commission and the Minnesota Department of Human Rights may be authorized by federal or state law to receive private information from your file in order to investigate specific complaints of employment discrimination. Otherwise, no private record of yours will be shared with any outside person or agency without your informed consent or a valid court order. Personnel data may be given to labor organizations to the extent necessary to conduct elections, notify employees of fair share fee assessments, and to implement the Public Employees Labor Relations Act. Personnel data may also be given to the Bureau of Mediation Services, when it so orders.

You are not legally required to supply any of the data we ask for on your application, but if you choose to withhold it, we cannot consider you for employment. If you do provide the data, your application will be considered, and if you are employed, the information you have given us as an applicant will become part of your employment record.

TENNESSEN WARNING

In accordance with the Minnesota Government Data Practices Act, the City of Waseca is required to inform you of your rights as they relate to the private information collected from you. Private data is information which is available to you, but not to the public; the personal information we collect about you is private. Minnesota Statutes 130.04 and 13.43 are two sections that govern what affects you as an applicant for employment at the City of Waseca. 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 Waseca. 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 bonafide need for the data. Public data is available to anyone requesting it and consists of all data furnished in the application for employment which is 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 City of Waseca City Manager'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 Waseca 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:

APPLICATION FOR EMPLOYMENT

- I M P O R T A N T -

The City of Waseca welcomes you as an applicant for employment. The City of Waseca is an Affirmative Action, Equal Opportunity Employer and will not discriminate against any applicant or employee on any grounds protected under Federal, State, or local law, regarding race, color, creed, religion, age, sex, marital status, handicap and disabilities or other physical limitations. None of the questions in this application are intended to elicit information regarding any protected characteristics, nor imply any limitation, illegal preferences, or discrimination based upon non-job-related information.

Please furnish us with complete information as outlined in this application. You may attach a resume or other additional information for consideration in conjunction with the completed application. Please print in ink or type.

Position Desired: _____

Date Available: _____ Full Time: _____ Part Time: _____ Seasonal: _____

- P E R S O N A L D A T A -

Last Name First Middle

Present Address City State Zip

Home Phone: _____ between the hours of _____ and _____

Work Phone: _____ between the hours of _____ and _____

May we contact you at work? YES _____ NO _____

Are you a U.S. Citizen, or legally eligible to work in the United States? YES _____ NO _____

- WORK EXPERIENCE -

List your work experience (paid or volunteer), beginning with the most recent employer and working back. Military training may also be included.

Employer _____ Job Title _____
Address _____ Employed from _____ to _____
Supervisor _____ Present Salary _____
Telephone _____ Reason for Leaving _____

Summarize your responsibilities _____

Employer _____ Job Title _____
Address _____ Employed from _____ to _____
Supervisor _____ Present Salary _____
Telephone _____ Reason for Leaving _____

Summarize your responsibilities _____

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Address _____ Employed from _____ to _____
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Telephone _____ Reason for Leaving _____

Summarize your responsibilities _____

Are there any employers you do not want us to contact? *(list and explain)*

- POSITION INFORMATION -

If you have any licenses or certificates please give the name, level and number of licenses or certificates that may pertain to this position: _____

If this position requires driving, please give your driver's license number, indicate the class or classes and endorsements:

License Number _____

Class: A ___ B ___ C ___ D ___ Endorsements: 0 _ 1 ___ 2 ___ 3 ___

If relevant to the position you're applying for, please list any special skills you have, or machines you can operate. Example: typing (WPM), computer and/or software, construction equipment, power tools, etc.:

- EDUCATION -

<u>TYPE OF SCHOOL</u>	<u>NAME AND ADDRESS</u>	<u>DEGREE/DIPLOMA</u>	<u>AREA STUDY</u>
High School	_____	_____	_____
Vocational/Technical	_____	_____	_____
College	_____	_____	_____
College	_____	_____	_____
Other	_____	_____	_____

- MILITARY SERVICE -

Branch of Service: _____

Current Draft or Reserve Status: _____

Rank at time of discharge: _____

Military Occupation: _____

- WORK RELATED REFERENCES -

NAME:

ADDRESS:

PHONE NUMBER:

- 1. _____
- 2. _____
- 3. _____

Use this space below to detail any additional information that qualifies you for this position.

The facts set forth in this application for employment are true and complete. I understand that if employed, false statements on this application are sufficient cause for dismissal. I also understand that my employment would be contingent on satisfactorily passing a pre-employment physical examination and/or any other examinations required by the City of Waseca.

Signature

Date

VETERAN'S PREFERENCE POINTS APPLICATION INSTRUCTIONS

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 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 residential 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.

YOU MUST SUPPLY A COPY OF YOU 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.

ARE YOU APPLYING FOR VETERAN'S BONUS POINTS? Yes No

If you answered "yes" your DD214 or other documentation must be received no later than 7 calendar days after the application deadline for the position.

VETERAN'S PREFERENCE POINTS APPLICATION		Veteran _____, veteran's name:	
Self _____	Spouse _____	If spouse _____	
Branch of Service: _____		Period of Active Duty: From: _____ To: _____	
Rank at Discharge: _____	Type of Discharge: _____	Date of Final Discharge: _____	Service No. _____
Are you receiving or eligible for a military pension?		Yes _____	No _____
Do you have a compensable service-related disability:		Yes _____	No _____
Preference Requested: _____		Veteran _____ Disabled Veteran _____	
_____		Spouse or Disabled Veteran _____ Spouse or Deceased Veteran _____	

Your Preference Points application can be considered without supporting documentation (see instructions above). If the documentation is not attached, it must be received in our office no later than 7 calendar days after the application deadline for the position in order to guarantee points are awarded in a timely manner.

Supporting documentation: is attached will be submitted within 7 days of application deadline

FOR OFFICE USE ONLY
 10 points _____
 15 points _____

AFFIRMATIVE ACTION APPLICANT'S INFORMATION

To All Applicants:

The following information in no way affects you as an individual applicant. This information will be used to find out how effective our recruitment efforts are in reaching all segments of the population and in validation of our selection methods. The information will not be maintained in personnel files and it will not be made available to any person involved in decisions affecting an individuals appointment or promotion to a position. Although providing this information is voluntary, it is important that all applicants answer these questions so that we may take steps to prevent discrimination in the recruitment and selection of employees for public service.

Position applying for: _____

Department: _____

Instructions: Mark the choice that answers each of the following questions.

1. What sex are you? _____ Male _____ Female
2. Of the following, of what racial/ethnic group do you consider yourself?

- _____ American Indian/Alaskan Native
- _____ Asian
- _____ Black/African American
- _____ Hispanic/Latino
- _____ Native Hawaiian/Other Pacific Islander
- _____ White
- _____ Multiracial

3. Do you have a disability?
_____ No _____ Yes

4. How did you learn about this job opening?
_____ City of Waseca Website
_____ League of Minnesota Cities Website
_____ Waseca County News
_____ City Employee
_____ School
_____ Other (Please describe)