

City of Dawson

675 Chestnut Street; PO Box 552; Dawson MN 56232
Telephone (320) 769-2154

APPLICATION FOR EMPLOYMENT

We welcome you as an applicant for employment with the City of Dawson. It is the City of Dawson's policy to provide equal opportunity in employment. The City of Dawson will not discriminate on the basis of race, color, creed, age, religion, national origin, marital status, disability, sex, sexual orientation, sexual preference, status with regard to public assistance, local human rights commission activity or any other basis protected by law.

Please furnish complete information, so we may accurately and completely assess your qualifications. You may attach any other information which provides additional detail about your qualifications for employment in the position you seek. Please refer to the Applicant Data Practices Advisory for information regarding what is considered public and private information as an applicant, and if you are selected for the position, as an employee.

The City of Dawson 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 the City Manager at 320-769-2154.

Please print in INK or type when completing this application

Title of position applying for:

Name:	(Last)	(First)	(MI)	(Prior)*
Street Address				
City, State, Zip				
Phone Number			Alternate Phone	
Email				
Are you legally eligible to work in the United States in the position for which you are applying?				<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you at least 18 years old?				<input type="checkbox"/> Yes <input type="checkbox"/> No

Educational Information

Circle the highest grade completed			
1 2 3 4 5 6 7 8 Grade School	9 10 11 12 GED High School	13 14 15 16 College/Technical	MA MS PHD JD Graduate
Did you graduate: (Please check)	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>High School</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>College/Technical</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>Graduate JD</i>

School Name	Address	Course of study	Degree
High School:			
College:			
Graduate School:			
Technical/Vocational:			
Other:			
Other:			

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:

Please list three references that may be contacted:

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

Employment Experience

List present or most recent employer first. Please note "see resume" is not an acceptable response for any entries on this application. Resumes will only be considered in addition to, but not in lieu of, this application. Up to 10 years of relevant experience is recommended.

Company	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? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Company	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? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Employment Experience Continued

Company	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? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Company	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? <input type="checkbox"/> Yes <input type="checkbox"/> No		

ATTACH ADDITIONAL SHEETS IF NECESSARY

Unsalariated Experience

Describe any unsalaried or volunteer experience relevant to the position for which you are applying.

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 Dawson 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.

With my signature below, I am providing the City of Dawson 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 further understand that criminal history checks may be conducted (after I have been selected for an interview, in the 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 Dawson in writing of any changes to information reported in this application for employment.

Signature

Date

Veterans' Preference

COMPLETE THIS FORM ONLY IF YOU ARE CLAIMING VETERANS' PREFERENCE NOTE: COPY OF "MEMBER COPY 4" VETERAN'S DD214 MUST BE ATTACHED (Veteran is defined by Minn. Stat. § 197.447)

You must submit a PHOTOCOPY of your "Member Copy 4" of your DD214 or other military documents to substantiate the service information requested on the form. Claims not accompanied by proper documentation will not be processed. For assistance in obtaining a copy of your "member Copy 4" of your DD214, contact your County Veterans' Service Office.

The City of Dawson operates under a point preference system, which awards points to qualified veterans to supplement their application. 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, who died on active duty or as a result of active duty, 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 for the first promotion after securing employment with the City of Dawson.

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 "Member Copy 4" DD214 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)	Social Security Number	Position For Which You Applied
Address (Street)			Phone Number	Closing Date: Are you a US Citizen or Resident Alien? <input type="checkbox"/> YES <input type="checkbox"/> NO
	(City)	(State)	(Zip)	

VETERAN (10 points):

("Member Copy 4" of DD214 or DD215 must be submitted to receive points)

Honorably discharged veteran Yes No

DISABLED VETERAN (15 points):

("Member Copy 4" of DD214 and USDVA letter of disability rating decision of 10% or more must be submitted to receive points)

Percent of Disability: _____%
Have you ever been promoted within the City of Dawson's employment? Yes No

SPOUSE OF DECEASED VETERAN (10 points or 15 if the veteran was disabled at time of death):

("Member Copy 4" of DD214 or DD215, photocopy of marriage certificate, spouse's death certificate and proof veteran died on or as a result of active duty must be submitted to receive points. You are ineligible to receive points if you have remarried or were divorced from the veteran.)

Date of Death: _____ Have you remarried? Yes No

SPOUSE OF DISABLED VETERAN (15 points):

("Member Copy 4" of DD214 or DD215 and USDVA letter of disability rating decision of 10% or more must be submitted to receive points.)

How does Veteran's disability prevent performance of a stated job "requirement?" Due to the veteran's service-connected disability the veteran is unable to qualify for this position because (be specific):

AFFIDAVIT: 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 Dawson by the required application deadline.

Signature

Date

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 Dawson 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
- American Indian or Alaskan Native through Tribal 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

