

City of Starbuck

307 East Fifth Street / P.O. Box 606
 Starbuck, MN 56381-060
 (320) 239-2525 Fax (320) 239-2545



APPLICATION FOR EMPLOYMENT

APPLICANT INFORMATION					
Last Name		First Name		Middle Name	Date
Street Address			Apt # Unit		
City and State			Zip Code		
Phone			E-mail Address		
Position Applying for			Date Available		
Are you over 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No			Are you a United States Citizen or legally eligible to work in the U.S.? (If offered employment you will have to provide proof of your eligibility.) <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever worked for the City? <input type="checkbox"/> Yes <input type="checkbox"/> No			If so, when?		
Statement of Interest: Give a brief statement of why you are interested and feel qualified for the position.					
Drivers License Information		Number	State of Issue	Class	Endorsement(s)
EDUCATION / TRAINING					
Education: Did you graduate from high school or receive a GED? <input type="checkbox"/> Yes <input type="checkbox"/> No					
How many years of schooling have you completed? 7 8 9 10 11 12 13 14 15 16 17 18 19 20					
High School		Address			
Did you Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No		Degree			
Post-Secondary		Address			
Did you Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No		Degree			
Post-Secondary		Address			
Did you Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No		Degree			
Post-Secondary		Address			
Did you Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No		Degree			
List academic honors you received or extracurricular activities in which you participated during school.					

PREVIOUS EMPLOYMENT

Please list your employment history for the past ten (10) years, beginning with the most recent. Attach additional pages if necessary.

Employer	Phone
Address	Supervisor Name/Title
Job Title	
Responsibilities	

From	To	Reason for Leaving
May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer	Phone
Address	Supervisor Name/Title
Job Title	
Responsibilities	

From	To	Reason for Leaving
May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer	Phone
Address	Supervisor Name/Title
Job Title	
Responsibilities	

From	To	Reason for Leaving
May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		

OTHER: Please account for any period of unemployment of at least 30 days and/or part-time employment not listed above.

Have you ever been involuntarily terminated from employment? Yes No If yes, state name and address of company and reason for termination.

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than Honorable, explain		
Claiming Veterans Preference? <input type="checkbox"/> Yes <input type="checkbox"/> No Signature: _____ Date: _____	Veterans who served on activity duty in the U.S. Armed Forces and were separated under honorable conditions may be eligible for veterans' preference. When claiming preference, veterans must provide a copy of their DD-214, Certificate of Release or Discharge from Active Duty, or other acceptable documentation. Applicants claiming a 10 point preference will need to submit <u>Form SF-15, Application for 10-point Veterans' Preference</u> . If you have questions about the applicability of veterans' preference for a particular vacancy please contact the City of Starbuck. Provide a copy of current status of orders.	

Tasks/responsibilities within military:

List volunteer work you have performed:

CONVICTION INFORMATION

No person shall be disqualified from public employment solely or in part because of prior conviction of a crime or crimes, unless the crime or crimes for which convicted directly relate to the position of employment sought. Final applicants will be subject to a criminal background investigation.

As an adult, have you ever been convicted or pled guilty to a felony, gross misdemeanor or misdemeanor for which a jail sentence could have been imposed? Yes No

If yes, provide:

Date and Place	Nature of Offense	Disposition

REFERENCES – Please list three professional references

Full Name	Relationship
Company	Phone
Address	

Full Name	Relationship
Company	Phone
Address	

Full Name	Relationship
Company	Phone
Address	

SPECIAL SKILLS

Please identify any special skills, licenses, certifications, other education, training or other information you wish to have considered.

The City of Starbuck is an equal employment opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, national origin, sex, marital status, status with regard to public assistance, disability, sexual orientation or age.

INFORMATION RELEASE / DISCLAIMER / AND SIGNATURE

I understand that information I have provided in this written application may be classified as public per Minnesota State Statutes, Chapter 13. I authorize the City of Starbuck the right to solicit and receive verification of all information contained in this application for employment from any and all sources that are necessary, in the opinion of the city, to verify the information I have provided. Verification may include completing a background check utilizing criminal history, credit check, and character references. I hereby hold the City of Starbuck harmless and waive my right to pursue legal action against the city for denial of employment based on information reasonably obtained from other sources about my application.

Signature

Date

In the event of an offer and acceptance of employment with the City of Starbuck, I understand that false or misleading information provided by me in this application is grounds for termination of employment without recourse. I further understand that employment with the City is subject to all policies, procedures, and rules maintained by the city or individual departments.

I certify that my answers are true and complete to the best of my knowledge.

Signature

Date