PENNINGTON COUNTY

EMPLOYMENT APPLICATION

Pennington County welcomes you as an applicant! It is the County's policy to provide equal opportunity in employment. The County will not discriminate on the basis of race, color, creed, age, religion, national origin, marital status, disability, sex, sexual orientation, status with regard to public assistance, or any other basis protected by law. Employment decisions will be made on the basis of individual ability and merit, without discrimination or unlawful preference.

The information contained in this application is considered private data under the Minnesota Data Practices Act and will be used only in conjunction with your possible employment. Please furnish complete information, so we may accurately and completely assess your qualifications. You may attach any other information, such as a resume or cover letter, which provides additional details about your qualifications for employment in the position you seek. As an applicant for employment, your name is considered private until you become a finalist for employment with the County. You are considered a finalist if and when you are selected and notified for a job interview.

DATE OF APPLICATION: _____

POSITION APPLIED FOR: _____

APPLYING FOR: ☐ Full-Time ☐ Part-Time ☐ Seasonal

AVAILABLE TO WORK: ☐ Weekdays ☐ Weekends ☐ Days ☐ Nights

REFERRAL SOURCE: ☐ Advertisement ☐ Friend ☐ Relative ☐ Employment Agency

☐ Other _____

LAST NAME: _____ FIRST: _____ MIDDLE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____

HOME PHONE: _____ CELL PHONE: _____

ARE YOU AUTHORIZED TO WORK IN THE U.S. ON AN UNRESTRICTED BASIS?

☐ YES ☐ NO

Note: Proof of citizenship or work eligibility will be required as a condition of employment.

ARE YOU AT LEAST 16 YEARS OF AGE? ☐ YES ☐ NO

ARE YOU AT LEAST 18 YEARS OF AGE? ☐ YES ☐ NO

MAY WE CONTACT YOUR PRESENT EMPLOYER? ☐ YES ☐ NO

IF NO, PLEASE EXPLAIN: _____

_____

HAVE YOU PREVIOUSLY WORKED FOR THE COUNTY? ☐ YES ☐ NO

IF YES, POSITION HELD & DEPARTMENT: _____

CAN YOU TRAVEL IF A JOB REQUIRES IT? ☐ YES ☐ NO

DO YOU HAVE ANY SPECIAL NEEDS WHICH MAY NECESSITATE ACCOMMODATIONS IN THE APPLICATION / INTERVIEW PROCESS?

☐ YES ☐ NO

IF YES, PLEASE DESCRIBE THE TYPE OF ACCOMMODATION REQUESTED:

_____

_____

LIST ANY OTHER NAMES WHICH YOU HAVE BEEN EMPLOYED OR UNDER WHICH YOUR EMPLOYMENT OR EDUCATION RECORDS MAY BE FOUND:

_____

_____

EDUCATION

Educational Institution	Name & Address of Institution	Major / # Years Attended	Did You Graduate? (Yes/No)	Diploma Or Degree Awarded
High School				
College				
College				
Other: (Please Specify)				

DRIVER'S LICENSE

If required for the position you are applying for, include your driver's license number and type.

DL# _____ Special Endorsements: _____

TYPE:

- ☐ MINNESOTA CLASS A
- ☐ MINNESOTA CLASS B
- ☐ MINNESOTA CLASS D
- ☐ OTHER: STATE _____ CLASS: _____

OTHER LICENSES

If required for the position you are applying for, or if you believe it demonstrates relevant experience, please list any other current licenses you have.

License/Certificate	Licensing Agency	Expiration Date	License Number

SOFTWARE/COMPUTER

Please list all software that you have training in or experience with that is relevant to the position for which you are applying. Ex: Microsoft Office, business systems, etc.

_____
_____
_____

SPECIAL SKILLS

Please list any special skills or training you have that is relevant to the position for which you are applying:

_____
_____
_____
_____

PROFESSIONAL REFERENCES

Please list three professional references, who are not relatives, who would be willing to comment on your past work experience. Ex: managers, directors, supervisors, department heads.

Name: _____
Occupation: _____
Work Phone: _____ Home Phone: _____

Name: _____
Occupation: _____
Work Phone: _____ Home Phone: _____

Name: _____
Occupation: _____
Work Phone: _____ Home Phone: _____

EMPLOYMENT HISTORY

Please list your employment history in chronological order, beginning with the most recent. You may limit employment history to ten (10) years, or older if relevant to the position for which you are applying.

Present / Most Recent Employer:

Employer: _____
Employer Address (City/State): _____
Job Title: _____
Dates of Employment: _____
Major duties or responsibilities, including any supervisory: _____
_____
_____
_____
_____
Reason for leaving: _____
_____
_____
May we contact this employer regarding your work? ☐ Yes ☐ No; Work Number: _____

Previous Employer:

Employer: _____
Employer Address (City/State): _____
Job Title: _____
Dates of Employment: _____
Major duties or responsibilities, including any supervisory: _____
_____
_____
_____
_____
Reason for leaving: _____
_____
_____
May we contact this employer regarding your work? ☐ Yes ☐ No; Work Number: _____

Previous Employer:

Employer: _____
Employer Address (City/State): _____
Job Title: _____
Dates of Employment: _____
Major duties or responsibilities, including any supervisory: _____
_____
_____
_____
_____

Reason for leaving: _____
_____
_____
May we contact this employer regarding your work? ☐ Yes ☐ No; Work Number: _____

Previous Employer:

Employer: _____
Employer Address (City/State): _____
Job Title: _____
Dates of Employment: _____
Major duties or responsibilities, including any supervisory: _____
_____
_____
_____
_____
Reason for leaving: _____
_____
_____
May we contact this employer regarding your work? ☐ Yes ☐ No; Work Number: _____

Previous Employer:

Employer: _____
Employer Address (City/State): _____
Job Title: _____
Dates of Employment: _____
Major duties or responsibilities, including any supervisory: _____
_____
_____
_____
_____
Reason for leaving: _____
_____
_____
May we contact this employer regarding your work? ☐ Yes ☐ No; Work Number: _____

Previous Employer:

Employer: _____
Employer Address (City/State): _____
Job Title: _____
Dates of Employment: _____
Major duties or responsibilities, including any supervisory: _____
_____
_____
_____
_____
Reason for leaving: _____
_____
_____

May we contact this employer regarding your work? ☐ Yes ☐ No; Work Number: _____

CLAIM FOR VETERAN'S PREFERENCE

The eligibility requirements for Veteran's Preference are listed below. Read them carefully to see if you qualify. If you do wish to receive preference, be sure to complete this section. Providing the information in this section is voluntary, but you must do so if you wish to obtain the preference.

Veteran Eligibility for Open Competitive Position:

Must be a U.S. Citizen or resident alien who has separated under honorable conditions:

(1) After serving on active duty for 181 consecutive days, or
(2) By reason of disability incurred while serving on active duty.

Disabled Veteran Eligibility for Open Competitive Position:

Must have a compensable service- connected disability as adjudicated by the United States Veteran's Administration or by the Retirement Board of the several branches of the armed forces and the disability must exist at the time preference is claimed.

Disabled Veteran Eligibility for Promotional Position:

Must, at the time of election to use preference, be entitled to disability compensation for a permanent service-connected disability rated at 50% or more and the position for which you are applying must be the first promotion after entering public employment.

Eligibility as a Spouse of a Deceased or Disabled Veteran:

Must be a spouse of either a deceased veteran or the spouse of a disabled veteran who, because of a disability, is unable to qualify for the particular position due to his/her disability and who would have or does meet the criteria for one of the above-listed preferences.

ALL APPLICANTS CLAIMING VETERAN'S PREFERENCE MUST ATTACH A COPY OF HIS OR HER FORM DD214. FAILURE TO DO SO MAY RESULT IN LOSS OF VETERAN'S PREFERENCE ELIGIBILITY. 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.

Are you requesting veteran's preference points? ☐ **Yes** ☐ **No**

If yes, please choose one:

☐ Honorably Discharged Veteran's Preference (10 points)
☐ Honorably Discharged Disabled Veteran's Preference (15 points)

If you answered "yes," above, your DD214 or other documentation must be received no later than the application deadline for the position. If you supply the supporting documentation by separate mail, your name and the position applied for must be included.

PRIOR EMPLOYMENT

Have you ever been discharged or forced to resign from prior employment? ☐ Yes ☐ No
If yes, identify the employer and describe the circumstances:

_____
_____
_____

PERSONAL STATEMENT

Please indicate why you are interested in the position for which you are applying:

_____
_____
_____
_____

CRIMINAL BACKGROUND CHECK

Pennington County may conduct a criminal background check on individuals that become a finalist for the position applied for, or upon receiving a contingent job offer. For certain positions, criminal background investigations will be requested during the application stage. No offer of employment shall become final until receipt of the results of the criminal background check, the content of which must be deemed acceptable by the County, and formal approval of hire by the Board of Commissioners.

TENNESSEN WARNING

In accordance with the Minnesota Government Data Practices Act, Pennington County is required to inform you of your rights as they pertain to the private information collected from you. Private data is that information which is available to you, but not to the public. The personal information we collect about you is private.

Minnesota Statutes 13.01 to 13.87 on Government Data Practices require that you be informed that the following information which you are asked to provide on the application for employment, or after employment, is considered private data:

1. Name
2. Home Address
3. Home Phone Number
4. Social Security Number
5. Date of Birth
6. Conviction Record
7. Sex
8. Age Group
9. Disability Type

We ask this information for the following reasons:

To distinguish you from all the other applicants and identify you in our personnel files; to enable us to verify that you are the individual who makes the application;

to enable us to contact you when additional information is required;
to send you notices and/or schedule you for interviews;
to determine if you meet the minimum age requirements (if any);
to conduct proper investigations if you are applying for a position;
to determine whether or not your conviction record may be a job related consideration affecting your suitability for the position you applied for;
to enable us to ensure your rights to equal opportunities;
to meet federal and state reporting requirements;
and to make processing more efficient.

The date supplied by you may be used for such other purposes as may be determined to be necessary in the administration of personnel in Pennington and the policies, rules and regulations promulgated pursuant thereto.

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 and to other persons in the County Office who have a bonafide need for the data. Public data is available to anyone requesting it and consists of all data furnished in the employment process which is not designated in this notice as private data.

Please acknowledge that you have read and understand the Tennessen Warning.

Signature Date

CERTIFICATION, ACKNOWLEDGEMENT AND RELEASE

I have read and understand the job description for the position for which I am applying and 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 immediate dismissal should I become employed by the County.

I understand, acknowledge, and agree that no offer of employment is valid or binding until formal approval by the County Board of Commissioners, and that until such approval the County 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 and references named in this application to release to the County and/or its agents any and all information regarding my job performance and fitness/qualifications to perform the position I am presently seeking. I understand that if in the “Employment” section I answered “No” to the question “May we contact this employer?”, contact will not be made without my specific authorization. I understand that the County will use any information obtained to determine my fitness and/or qualifications for the position I am seeking. This authorization expires one year from the date of my signature below.

I hereby release Pennington County and all current and former employers, volunteer

organizations and references listed herein, and any and all agents acting on behalf of Pennington County, for any and all liability of whatever nature by reason of requesting or providing such information.

I understand that this application is not, and is not intended to be, a contract of employment.

Printed Name: _____

Signature: _____ Date Signed: _____

PLEASE RETURN COMPLETED APPLICATION AND ANY OTHER APPLICATION MATERIALS TO THE CONTACT AND ADDRESS LISTED IN THE JOB ANNOUNCEMENT

Pennington County will accept job applications in-person, via email, or via fax, if 1) it is received by the job closing date and time; 2) the application and all necessary supporting documentation is included; and 3) the application and all certifications within are signed/dated as required.

THANK YOU FOR YOUR APPLICATION AND INTEREST IN EMPLOYMENT WITH PENNINGTON COUNTY