DATE RECEIVED



CITY OF SILVER BAY

City Hall, 7 Davis Drive Silver Bay, MN 55614 (218) 226-4408 www.silverbay.com **OFFICE USE ONLY**

Application for Employment

We welcome you as an applicant for employment with the City of Silver Bay. It is the City of Silver Bay's policy to provide equal opportunity in employment. The City of Silver Bay will not discriminate on the basis of race, color, creed, age, religion, national origin, marital status, disability, sex, sexual orientation, familial status, 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 guidance regarding how your application information will be used, the consequences of providing or not providing your information, and more.

The City of Silver Bay 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 Administrator at (218) 226-4408.

Position Applying For:				Date of I	Application:		Date Ava	te Avallable to Start Work:	
Last Name			F	First Name		Middle Name			
Street Address			(City				State /	Zip Code
Phone Number Email Add			mail Addre	ess				County	
Are you at least 18 years of age? ☐ Yes ☐ No	Proof of co						re applying?		
Have you previously been employed by the City? Yes - If yes, date position No							r	☐ Full-time	
		Е	ducati	onal	Informatio	n			
Circle the highest g	rade com	pleted							
1 2 3 4 5 6 7 8 9 10 11 12			GED	13 14 1			A MS	PHD JD	
Grade School	Grade School High School		n School		College/Te	chnical	Graduate		uate
Did you graduate:		□ Yes □		No	□ Yes	□ No		Yes	□ No
School Name Address				Course Study		Degre	e		
High School:									
College:									
Graduate School:									
Technical/Vocational:									
Other:									
Other:									
	l				1				

Employment Experience				
List 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. Experience and training ratings are determined by this information; please be complete. Ten years of relevant experience is recommended.				
Employment Firm				
Street Address		City		State / Zip Code
Phone Number	Your Job Title	Length of Employment	Hrs./Week	Last Salary
Supervisor's Name		Supervisor's Title		
Number and type of pos	sitions you supervised			
Principal Responsibilities	s – Be complete			
Reason for leaving – Be	e specific			
May we contact this employer? ☐ Yes ☐ No — Please explain why.				
Employment Firm				
Street Address		City		State / Zip Code
Phone Number	Your Job Title	Length of Employment	Hrs./Week	Last Salary
Supervisor's Name		Supervisor's Title		
Number and type of positions you supervised				
Principal Responsibilities	s – Be complete			
Reason for leaving – Be specific				
May we contact this em ☐ Yes ☐ No — Please explain				

Employment Firm					
Street Address		City		State / Zip Code	
Phone Number	Your Job Title	Length of Employment	Hrs./Week	Last Salary	
Supervisor's Name		Supervisor's Title			
Number and type of pos	sitions you supervised				
Principal Responsibilities	s – Be complete				
Reason for leaving – Be	specific				
Reason for leaving De	Specific				
May we contact this em	ployer?				
□ No – Please explain	why.				
Employment Firm					
Street Address		City		State / Zip Code	
Phone Number	Your Job Title	Length of Employment	Hrs./Week	Last Salary	
Supervisor's Name		Supervisor's Title			
Number and type of pos	sitions you supervised				
Principal Responsibilities	s – Be complete				
Reason for leaving – Be	cnocific				
Reason for leaving – be	specific				
May we contact this em Yes	ployer?				
□ No – Please explain	why.				

Job-Relevant Vo	olunteer and Unpaid work	Experience	1
Describe any unpaid or volunteer experier	nce relevant to the position for which yo	ou are applying (y	ou may exclude, if
you wish, information which would reveal	race, sex, religion, age, disability, or oth	er protected statu	s).
Kind of volunteer activity	Major responsibilities	Hrs./Month	Years of Service
(Do not specify organization)			
List any other sources cominars worksh	one or training you have that may pr	ovido vou with d	ille rolated to this
List any other courses, seminars, worksh	ops, or training you have that may pr	ovide you with sk	alls related to tris
position:			
List any current licenses, registrations, or o	rertificates you possess which may be re	elated to this posit	ion:
List arry current necrises, registrations, or t	certificates you possess which may be re	siacea to this posic	10111
CLERICAL APPLICANTS ONLY:	Word Processing / Computer Exper	ience:	
	37		
		oftware and hardy	
In accordance with the Immigration Reform			
lawfully authorized alien workers. If hire			n of citizenship or
legalized alien program. Failure to provide			
Minn. Stat. Sec. 518.611, Subd. 8, require	·		
ordered child support obligations that are i			will be required to
provide such documentation. Failure to pr			
If you are hired for this position, you may			
determine whether or not you are able to		an effective and	sare manner, and
whether or not accommodations are neces			
	Military Experience		
Did you serve in the U.S. Armed Forces?			
☐ Yes – Please describe your duties.			
□ No			
Do you wish to apply for Veterans' Prefere	nce points?		
□ Yes			
□ No			
If you answered "yes," you must complet			
application and required documentation to	the City of Silver Bay by the application	n deadline of the	position for which
you are applying.			

	References			
List four people other than relatives who can be contacted regarding your qualifications, work habits, and character.				
Name	Address	Phone #	Position/Relation to your work	
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. I further acknowledge my understanding that employment with the City of Silver Bay is "at-will," and that employment may be terminated by either the City of Silver Bay or me at any time, with or without notice.

With my signature below, I am providing the City of Silver Bay 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 have read the included Applicant Data Practices Advisory, and 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 Silver Bay in writing of any changes to information reported in this application for employment.

Signature Date

The City of Silver Bay does not discriminate on the basis of handicapped status in the admission or access to, or treatment or employment in, its programs and activities. It is a policy of the City of Silver Bay to provide reasonable accommodations to the known physical and mental limitations of qualified handicapped applicants and employees in order for them to perform the essential functions of the job in question.

THE CITY OF SILVER BAY IS AN AFFIRMATIVE ACTION/EQUAL OPPORTUNITY EMPLOYER

Veterans' Preference

COMPLETE THIS FORM ONLY IF YOU ARE CLAIMING VETERANS' PREFERENCE

NOTE: VETERANS' PREFERENCE POINTS CANNOT BE CONSIDERED WITHOUT SUPPORTING DOCUMENTATION. ATTACH A COPY OF "MEMBER COPY 4" VETERAN'S DD214, OR OTHER DOCUMENTATION VERIFYING SERVICE. DOCUMENTATION MUST BE RECEIVED BY THE APPLICATION DEADLINE OF THE POSTING IN ORDER TO BE CONSIDERED. (VETERAN IS DEFINED BY MINN. STAT. § 197.447)

You must submit a PHOTOCOPY of your "Member Copy 4" of your DD214 or other documentation verifying service to substantiate the services 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, or other documentation verifying service, contact your County Veterans' Service Office.

The City of Silver Bay 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. Veterans' 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 (5) points preference only for the first promotion after securing employment with the City of Silver Bay.

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, or other documentation verifying service, 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.

Position applied for:		Closing Date:		
Last Name	First Name	Middle Name		
Street Address	City	State / Zip Code		
Phone Number	Email Address			
Are you a US Citizen or Resident Alien: ☐ Yes ☐ No	•			
DISABLED VETERAN (15 points) ("Member Copy 4" of DD214, or other documents 10% or more must be submitted to receive point Percent of Disability:%		DVA letter of disability rating decision of		
Have you ever been promoted within the Cit Yes No	y of Silver Bay employment?			
SPOUSE OF DECEASED VETERAN (10 points ("Member Copy 4" of DD214, or other documer death certificate and proof veteran died on or as ineligible to receive points if you have remarried	ntation verifying service, pho a result of active duty must	tocopy of marriage certificate, spouse's be submitted to receive points. You are		
Date of Death:				
Have you remarried? ☐ Yes				
□ No				

SPOUSE OF DISABLED VETERAN (15 points) ("Member Copy 4" of DD214, or other documentation verifying service, 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):
<u>AFFIDAVIT</u> : 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 Silver Bay by the required application deadline.
Signature Date

Information Regarding Claiming Veterans' Preference

Preference points are awarded to qualified veterans as defined by Minn. Stat. § 197.477, and to certain spouses of deceased or disabled veterans subject to the provision of Minn. Stat. §§ 197.447 and 197.455.

The veteran must:

- a) be a U.S. citizen or resident alien;
- b) have received a discharge under honorable conditions from any branch of the U.S. Armed Forces; AND have either:
 - i. served on active duty for at least 181 consecutive days, or
 - ii. have been discharged by reason of service connected disability, or
 - iii. have completed the minimum active duty requirement of federal law, as defined by CFR title 38, section 3.12a, i.e., having fulfilled the full period for which a person was called or ordered to active duty by the United States President, or
 - iv. certified service and verification of "veteran status" granted under U.S. PL 95-202.

The information provided will be used to determine your eligibility for veterans' preference points. You are required to supply the following information:

- 1) Attach a copy of the "Member Copy 4" of your DD214 or DD215, or other documentation verifying service. This copy must state the nature of discharge; i.e., honorable, general, medical, under honorable conditions.
- 2) Disabled veterans must also supply a Military/United States Department of Veterans' Affairs Rating Decision that supports/verifies the fact that the injury was incurred while on, or as a result of, active duty service. Disability incurred while on, or as a result of, active duty for training purposes does not qualify for disabled veteran preference per Minn. Stat. §§ 197.455 and 197.447.
- 3) A spouse of a deceased veteran, applying for preference points must supply their marriage certificate, the veteran's "Member Copy 4" DD214 or DD215, or other documentation verifying service, USDVA verification that veteran died on or as a result of active duty, a death certificate, verification of their marriage at the time of veteran's death, and that the spouse has not remarried.

Thank you for your military service and for your interest in employment with the City of Silver Bay. Please contact our office at (218) 226-4408 or your local County Veterans' Service Office, if you have any questions regarding veterans' preference.

Applicant Data Practices Advisory

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

Purpose and intended use of the data:

The city collects this information for purposes of selecting a candidate for hire. Because the position for which you are applying may require you to provide care, treatment, education, training, instruction, or recreation to children, the City of Silver Bay will request the Bureau of Criminal Apprehension (BCA) to perform a criminal background check on you under Minnesota Statutes Chapter 299C.62.

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.

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.

TENNESSEN WARNING FOR EMPLOYMENT APPLICATION

You are being questioned as part of your application for employment by the City of Silver Bay, Lake County, Minnesota. You will be asked to supply private or confidential information about yourself pertaining to your application for employment. This information is being requested as part of the employment application process. Such information will be use by the City of Silver Bay to select an individual to fill the position of
This information may be used in court proceedings to defend the City of Silver Bay from any legal claims you make against the City of Silver Bay. In the event you are hired to fill the above position, the information you provided may be used to terminate or discipline you if any of it is later discovered by the City of Silver Bay to be false or misleading. In the event you are hired to fill the above position, this information may also be used to prosecute any legal claims the City of Silver Bay may have against you arising out of your employment with the City of Silver Bay.
This information may also be released to other persons and/or entities as required or allowed by law and/or upon direction by proper authority and/or pursuant to court order. These persons include, but are not necessarily limited to the City Council; management/administrative supervisors whose input is necessary in the decision making process; exclusive representatives and employees of the State of Minnesota; law enforcement agencies; and counsel for and parties to litigation pursuant to Court Order. All such releases are governed by the Minnesota Government Data Practices Act (Minn. Stat. Ch. 13).
This information will be kept on file for up to one year if you are not selected for employment. If you are selected for employment, this information will be kept on file for the duration of your employment with the City of Silver Bay.
By signing below you acknowledge receipt and understanding of this document. If you do not sign the form, your application may be considered incomplete. This document is not an offer of employment.

Date

Signature