City of Golden Valley
200 Brookview Parkway • Golden Valley, MN 55426
763-512-2345 • 763-512-2344 (fax) • 763-593-3968 (tty) • www.goldenvalleymn.gov

Application For Employment - Part-time, Seasonal & Temporary

The City of Golden Valley appreciates your interest in a position with the City. The City of Golden Valley is committed to a policy of equal opportunity in employment without regard to race, color, creed, religion, national origin, marital status, disability, status with regard to public assistance, sexual orientation, gender, age, or disability, and any other category protected by law.

Data provided on your application will be reviewed by various personnel within the City of Golden Valley to assess your qualifications for employment.

Personal Information

Name: Last First Middle

Present Address: Street City State Zip Code

Permanent Address (if different from above):

Phone Numbers: Home Work Cell School

Position Information

Position you are applying for:

Date available to start: Last day available to work:

Have you ever worked for the City of Golden Valley? ☐ Yes ☐ No

If yes, when? What position?

Do you have a Minnesota Driver's License? ☐ Yes ☐ No Number:

Do you have a valid Commercial Driver's License? ☐ Yes ☐ No Number:

Are you under 18 years of age? ☐ Yes ☐ No If yes, what is your date of birth?

Education

School Name and Location Starting with High School	**Area of Study**	**Did you graduate?**	**Degree Earned**

List any education, training, military and volunteer experience that you have, related to the position you are applying for:

Work History (list most recent employer first)

Employer	Address	May we contact this employer? ☐ Yes ☐ No
Supervisor Name Title	Telephone Number	
Job Title	Dates Employed: (Month/Year) From To	Base Salary/Wage: Start Current or End
Nature of Duties:		
Reason for leaving or seeking change of position:		

Employer	Address	May we contact this employer? ☐ Yes ☐ No
Supervisor Name Title	Telephone Number	
Job Title	Dates Employed: (Month/Year) From To	Base Salary/Wage: Start Current or End
Nature of Duties:		
Reason for leaving or seeking change of position:		

Employer	Address	May we contact this employer? ☐ Yes ☐ No
Supervisor Name Title	Telephone Number	
Job Title	Dates Employed: (Month/Year) From To	Base Salary/Wage: Start Current or End
Nature of Duties:		
Reason for leaving or seeking change of position:		

Professional References

List three people who know you well, preferably from a work environment. Do not list relatives.

Name	Business/Employer	Phone Number

Read Carefully and Sign

I hereby affirm that the information provided on this application is true and complete to the best of my knowledge. I also agree that falsified information or significant omissions on either the application or during my interview may disqualify me from further consideration for employment and may be considered justification for termination from employment. I authorize investigation of all statements contained in this application or made during my interview for employment as may be necessary in arriving at an employment decision.

1. I acknowledge that none of the statements made in this application are intended to be, nor should be construed as, a contract between the City and myself. If the position for which I am hired is not part of a union, I recognize that employment at the City of Golden Valley is "at-will" and not contractual, wherein the employer or employee may terminate the relationship at any time for any reason. I further acknowledge that the City may unilateraterally revise salaries, wages, benefits, and conditions of my employment.

2. I hereby authorize persons, schools, my current employer, previous employers, and organizations named in this application to provide any and all information regarding my employment, as well as any other information, whether personal or otherwise, that may or may not be on record. I release such employers and individuals from all liability for damages whatsoever that may arise from furnishing this information. I understand that this authorization may be revoked in writing by me at any time and in no event will it be valid for more than two years from the date below.

3. The City of Golden Valley has the right to verify all information provided in this application and to request information concerning my application, and I release all parties from any and all liabilities and claims for damages whatsoever that may result therefrom. However, I understand that if I answer "No" to the question "May we contact your present employer?" in the Employment Record section, contact with my current employer will not be made without my specific authorization.

Signature	Printed Name	Date

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Data Practices Advisory

Notice To Applicant: Please Read This Important Information

The Minnesota Government Data Practices Act (Minnesota Statutes 13.01 - 13.90) has two sections that affect applicants seeking employment with the City of Golden Valley. First, under "Rights of Subjects of Data" (MN 13.04), when an applicant is asked to provide personal data, the City must advise you of:

- The purpose and intended use of the data
- Whether you may refuse or are legally required to supply the requested data
- Any known consequence arising from your supplying or refusing to supply the data
- The identity of other persons or organizations authorized by State or Federal Law to receive the data you provide.

Second, under "Personnel Data" (MN Statute 13.43), the following data about an applicant for employment by a public agency is automatically public:

- veteran's status
- job history
- education and training
- relevant test scores
- rank on our eligibility list
- work availability

Notice Regarding Public Data: As an applicant, your name is considered private until you are certified as eligible for appointment to a position or are considered by the appointing authority to be a finalist for a position in public employment. If you are hired, the following additional data about you will be public:

- Your name
- Your city and county of residence
- Your actual gross salary, contract fees, salary range, and actual gross pension
- The value and nature of employer paid benefits
- The basis for and the amount of any added remuneration, including expense reimbursement, in addition to your salary
- Your job title and job description
- Your first and last employment dates with us
- The status of any complaints or charges against you while you work for the City of Golden Valley, whether or not they resulted in disciplinary action, the final disposition of any disciplinary action and supporting documentation
- Your work location and work telephone number
- Your education and training background
- Honors and awards you have received
- Payroll time sheets or other comparable data that are only used to account for your work time for payroll purposes: except to the extent that release of time sheet date would reveal employee's reasons for the use of sick or other medical leave or other non-public data
- Your previous work experience
- Your badge number

This data is private if the candidate is applying for or is hired for an undercover law enforcement position.

All data concerning you which is placed in your personnel file and which is not listed above is private data. This private data will be available to you and to members of City staff needing it to process City records. In addition, the following persons or organizations are authorized by State and Federal Law to receive this data if they so request in certain circumstances:

- The Bureau of Census
- Federal, State and County Auditors
- The State Department of Public Welfare
- The Department of Human Rights
- Federal Officials investigating compliance of Affirmative Action and Equal Employment Opportunities
- Labor Organizations and the Bureau of Mediation Services
- Data may also be made available through court order.

With the exception of the optional data requested, the data you provide is needed to identify you and to assist in determining your suitability for the position for which you are applying. The optional data is used in summary form to monitor protected class employment and meet Federal, State, and local reporting requirements. Furnishing the optional data requested about yourself is voluntary.

Notice To Minors: Minors from whom private or confidential data is collected have the right to request that parental access to the private data be denied.

Questions: If you have questions regarding your rights as a subject of data, please contact the City of Golden Valley Human Resources Department at: City Hall, 7800 Golden Valley Road, Golden Valley, MN 55427. This information is subject to change consistent with subsequent amendments to the Minnesota Government Data Practices Act.

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Veteran's Preference Questionnaire

Must be completed by all applicants and submitted with your completed application form

This questionnaire is to determine your status as a veteran under the Veteran's Preference Statute, Minnesota Statutes, 43A.11.

Veteran's Preference Statutes provide a five-point preference to those individuals who have attained a passing score on the entrance exam and who have received an Honorable Discharge or Separation after serving more than 180 consecutive days in the military service for purposes other than training (10 points if a disabled veteran). Veteran's Preference may not be claimed by any veteran who is receiving, or is eligible to receive, a monthly veteran's pension benefit based exclusively on length of military service.

☐ I am not a Veteran (please complete items 1-4 and sign and date the bottom of this form).

☐ I am a Veteran (please complete items 1-11 and sign and date the bottom of this form).

☐ I am the spouse of a deceased Veteran (please complete items 1-11 and sign and date the bottom of this form).

☐ I am the spouse of a disabled Veteran who is unable to use the preference due to the disability (please complete items 1-11 and sign and date the bottom of this form).

Personal Information

(1) Name: Last First Middle

(3) Address: Street City State Zip Code

(4) Position for which you are applying:

(5) If you achieve the minimum passing rating, do you wish to apply your veteran's preference bonus points? ☐ Yes ☐ No

(6) Are you receiving or eligible to receive a monthly veteran's pension? ☐ Yes ☐ No

(7) If a spouse of a deceased or disabled veteran, list veteran's name:

(8) Period of active duty: From To (Do not include short training periods of active duty with a reserve unit. You must have served with a unit that was on active duty, not one on reserve status.)

(9) Branch of service: Service number:

(10) Rank at discharge: Type of separation or discharge (honorable, general, etc):

(11) Service connected disability: Type Percent

It is necessary for you to provide the City with a copy of your form DD-214. 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 DD-214 and FL-802 forms, and the veteran's death certificate (if appropriate).

Your veteran's preference points cannot be considered without supporting documentation. If the documentation is not attached, it must be received in the Human Resources Office no later than seven calendar days after the deadline date for the position.

My supporting documentation: ☐ is attached ☐ will be submitted within seven calendar days

I swear that the above statements are true and accurate to the best of my knowledge and belief.

Signature	Date

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Applicant Flow Information

Confidential

The following is voluntary and confidential. It will not adversely affect your employment candidacy with the City or your status as an employee after appointment. The remaining voluntary information you provide will be used to determine how effective our recruitment efforts are in reaching all segments of the population and to validate our selection and placement methods. We would appreciate your cooperation in our efforts to ensure Equal Employment Opportunity.

Name: Last First			Age
Address: Street City State Zip Code			
Phone Number:	Gender: ☐ Female ☐ Male	Position for which you are applying:	Date of Application

With which racial/ethnic group do you identify? *(Please check only ONE.)*

☐ American Indian or Alaskan Eskimo ☐ Asian or Pacific Islander ☐ African-American ☐ Hispanic ☐ Caucasian

Do you have a physical disability? *(Please explain.)*

☐ Yes ☐ No

Recruitment Information

How did you hear about the position for which you are applying?

☐ City of Golden Valley Human Resources Office job posting

☐ From City of Golden Valley employee

☐ College, technical, or high school

☐ Newspaper (Which one?) _____

☐ City of Golden Valley web site _____

☐ Other Internet site (Which one?) _____

☐ Minnesota State Employment Agency _____

☐ Other (Specify) _____